

RECEIVED

By Tracy Crews at 7:37 am, May 24, 2024



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

REPORT #7

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 097417 NAME OF AGENCY Warrenton Police Department DATE OF INSPECTION 05/23/2024

LOCATION OF INSTRUMENT (STREET AND CITY) 200 West Booneslick Road Warrenton, Missouri 63383 TIME OF INSPECTION 3:36 pm

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

PRINTER WORKING PROPERLY

TIME AND DATE DISPLAYING PROPERLY

**BREATH ALCOHOL ACCURACY STANDARDS**

SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Guth Laboratories, Inc. LOT # 23390 EXP. DATE 10/17/2025

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.02 SIM. SN MP3585 SIM. NIST EXP DATE 01/30/2025

CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

- 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
- 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
- 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 .098

TEST 2 .097

TEST 3 .098

RFI DETECTOR OPERATING

**INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)**

REFUSALS 0 (0-.04) 0 (.05-.09) 0 (.10-.14) 0 (.15-.19) 0 (OVER .19) 0

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

Printer paper was changed, Time was adjusted (was fast by approximately 35 minutes)

**INSPECTING OFFICER**

SIGNATURE Det. James R. Plackemeier

PRINT NAME Det. James R. Plackemeier, DSN 224

TYPE II PERMIT NUMBER/EXPIRATION DATE 230326 / 12/21/2025

TELEPHONE NUMBER (636) 456-3535

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 097417  
Version no: 532B

TEST RECORD 00746 s/

Temp Date Time 210L

Air Blank: 05/23/24 15:36 .000  
Calibration Check: 21 05/23/24 15:36 .098

Subject Name Plackemeier, Maint  
Subject I.D. Test 1

Operator Name, I.D. Det. Plackemeier, 224  
Location Warrenton PD

AS IV Serial no: 097417  
Version no: 532B

TEST RECORD 00747 s/

Temp Date Time 210L

Air Blank: 05/23/24 15:39 .000  
Calibration Check: 22 05/23/24 15:39 .097

Subject Name Maint Check  
Subject I.D. Test 2

Operator Name, I.D. Det. Plackemeier, 224  
Location Warrenton PD

AS IV Serial no: 097417  
Version no: 532B

TEST RECORD 00748 s/

Temp Date Time 210L

Air Blank: 05/23/24 15:41 .000  
Calibration Check: 22 05/23/24 15:41 .098

Subject Name Maint Check  
Subject I.D. Test 3

Operator Name, I.D. Det. Plackemeier, 224  
Location Warrenton PD

AS IV Serial no: 097417  
Version no: 532B

TEST RECORD 00749 s/

Temp Date Time 210L

VOID: RFI  
12 05/23/24 15:46

Subject Name Maint Check  
Subject I.D. RTI - Test 4

Operator Name, I.D. Det. Plackemeier, 224  
Location Warrenton PD



Paula Nickelson  
 Acting Director

Michael L. Parson  
 Governor

# SIMULATOR CERTIFICATION REPORT

## SIMULATOR INFORMATION

Simulator Serial Number: MP3585      Manufacturer: Guth  
 Model Number:                            12V500  
 Agency:                                    WARRENTON PD  
 Agency Address: 200 W BOONESLICK ROAD., WARRENTON, MO 63383

## NIST THERMOMETER INFORMATION

Serial Number:                            17KMM00690      Bias:                    0.00  
 Uncertainty:                              0.02  
 Date of Certification:                    10/27/2023      Date of Expiration:    10/27/2024

## ENVIRONMENTAL CONDITIONS

The environmental conditions during testing are within the tolerances of DHSS BAP method 3.

## VERIFICATION RESULTS

<u>Simulator Average</u>	<u>NIST Average</u>	<u>Combined Uncertainty</u>
34.00	34.01	.03

The combined uncertainty is calculated with a k=2 value.

## ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing:                            1/30/2024  
 Certification Expiration:                1/30/2025  
 Simulator testing technician: R. SCHILDKNECHT

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving:      BRIANNA MEDRANO  
 Certification No:                            MP3585\_1302024

X *Brianna Medrano*

DHSS BAP Scientist Approving



# GUTH LABORATORIES, INC.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **23390** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **October 18, 2023**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1207%** (w/vol) ethyl alcohol. The expiration date for this lot number is **October 17, 2025** at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L  $\pm$  3%**.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

*NIST Traceability:*

*Testing was conducted using Cerilliant Reference Standard lot number FN03072301 whose values are traceable to NIST.*

*All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.*



STATE OF MISSOURI  
 DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BREATH ALCOHOL PROGRAM

2

**PERMIT**  
**TYPE II**  
**JAMES PLACKEMEIER**

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**ALCO-SENSOR IV WITH PRINTER**

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 12/21/2023

NUMBER 230326

EXPIRES 12/21/2025

*Mike Mason*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Daniel J. Nicholson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

STATE OF MISSOURI  
 DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BREATH ALCOHOL PROGRAM

**INSTRUMENT OPERATOR CARD**

*The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.*

Operator PLACKEMEIER, JAMES  
 Permit No 230326  
 Date Issued 12/21/2023 Date Expires 12/21/2025

