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By Tracy Crews at 7:51 am, Dec 17, 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 100291	NAME OF AGENCY Willow Springs Police Department	DATE OF INSPECTION 12/15/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 700 W. Main St., Willow Springs, MO 65793		TIME OF INSPECTION 1818

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 LOT # 23390 EXP. DATE 10/17/2025

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 33.9 SIM. SN MP5539 SIM. NIST EXP DATE 03/21/2025

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 ← .099

TEST 2 ← .097

TEST 3 ← .096

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

INSPECTING OFFICER

SIGNATURE

PRINT NAME **David Struble #410**

TYPE II PERMIT NUMBER/EXPIRATION DATE **240198 Expires 08/29/2026**

TELEPHONE NUMBER
(417) 469-3158

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: 100291
Version no: 532B

TEST RECORD 00830

Temp Date Time 210L

Air Blank:
12/15/24 19:03 .000
Subject Test: Man
23 12/15/24 19:03 .099

Subject Name

TEST # 1

Subject I.D.

D. Straube

Operator Name, I.D.

240198

Location

Willow Springs PD

AS IV Serial no: 100291
Version no: 532B

TEST RECORD 00831

Temp Date Time 210L

Air Blank:
12/15/24 19:05 .000
Subject Test: Man
24 12/15/24 19:05 .097

Subject Name

TEST # 2

Subject I.D.

D. Straube

Operator Name, I.D.

240198

Location

Willow Springs PD

AS IV Serial no: 100291
Version no: 532B

TEST RECORD 00832

Temp Date Time 210L

Air Blank:
12/15/24 19:07 .000
Subject Test: Man
24 12/15/24 19:07 .096

Subject Name

TEST # 3

Subject I.D.

D. Straube

Operator Name, I.D.

240198

Location

Willow Springs PD

AS IV Serial no: 100291
Version no: 532B

TEST RECORD 00833

Temp Date Time 210L

VOID: RFI
12 12/15/24 19:10

Subject Name

RFI

Subject I.D.

D. Straube

Operator Name, I.D.

240198

Location

Willow Springs PD



GUTH LABORATORIES, INC.

590 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.



Paula Nickelson
 Acting Director

Michael L. Parson
 Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: MP5539 Manufacturer: Guth
 Model Number: 12V500
 Agency: WILLOW SPRINGS PD
 Agency Address: 700 W MAIN ST, PO BOX 190, WILLOW SPRINGS, MO 65793

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	34.00	.02

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 3/21/2024
 Certification Expiration: 3/21/2025
 Simulator testing technician: R. SCHILDKNECHT

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: BRIANNA MEDRANO
 Certification No: MP5539_3212024

X *Brianna Medrano*

DHSS BAP Scientist Approving



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



PERMIT
TYPE II
DAVID C. STRUBLE

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, INTOX DMT

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 8/29/2024

NUMBER 240198

EXPIRES 8/29/2026

Mike Massman

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Dave J. Nicholson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

 **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 STRUBLE, DAVID
Permit No 240198
Date Issued 8/29/2024 **Date Expires** 8/29/2026

