



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 111319	NAME OF AGENCY Piedmont Police Dept	DATE OF INSPECTION 12/20/2024
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LOCATION OF INSTRUMENT (STREET AND CITY) 116 West Green Street , Piedmont	TIME OF INSPECTION 0625
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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

<input checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER <u>Guth Laboratories</u> LOT # <u>24110</u> EXP. DATE <u>03/05/2026</u>	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) <u>34.0c</u> SIM. SN <u>2257</u> SIM. NIST EXP DATE <u>12/02/2026</u>	

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 ← .097	TEST 2 ← .098	TEST 3 ← .097
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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
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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).

Alcohol Solution Simulator recertified by Mo Safety Center 12-2-2024,
Alcohol-Sensor 4 also sent to Mo Safety Center for maintanace checkover,

INSPECTING OFFICER	
SIGNATURE <u>Campbell #3284 / #240241</u>	PRINT NAME Shaun Campbell
TYPE II PERMIT NUMBER/EXPIRATION DATE 240241 / 11/27/2026	TELEPHONE NUMBER (573) 223-4300

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: 111319
Version no: 532B

TEST RECORD 00561

Temp Date Time ^{s/} 210L

Air Blank:
12/20/24 06:28 .000
Subject Test: Man
20 12/20/24 06:28 .097

Subject Name

Test One

Subject I.D.

One

Operator Name, I.D.

Campbell 240241

Location

116 W. Green St

Piedmont Mo 63957

AS IV Serial no: 111319
Version no: 532B

TEST RECORD 00563

Temp Date Time ^{s/} 210L

Air Blank:
12/20/24 06:32 .000
Subject Test: Man
21 12/20/24 06:32 .098

Subject Name

Test Two

Subject I.D.

Two

Operator Name, I.D.

Campbell 240241

Location

116 W. Green St

Piedmont Mo 63957

AS IV Serial no: 111319
Version no: 532B

TEST RECORD 00564

Temp Date Time ^{s/} 210L

Air Blank:
12/20/24 06:34 .000
Subject Test: Man
22 12/20/24 06:34 .097

Subject Name

Test Three

Subject I.D.

Three

Operator Name, I.D.

Campbell 240241

Location

116 W. Green St

Piedmont Mo 63957

AS IV Serial no: 111319
Version no: 532B

TEST RECORD 00562

Temp Date Time ^{s/} 210L

VOID: RFI
12 12/20/24 06:30

Subject Name

RFI

Subject I.D.

TEST

Operator Name, I.D.

Campbell 240241

Location

116 W. Green St

Piedmont Mo 63957



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 **24110** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **March 6, 2024**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1215%** (w/vol) ethyl alcohol. The expiration date for this lot number is **March 5, 2026** 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



PERMIT
TYPE II
SHAUN P. CAMPBELL

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 11/27/2024

NUMBER 240241

EXPIRES 11/27/2026

Adam J. Kubi

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Paula 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 CAMPBELL, SHAUN
Permit No 240241
Date Issued 11/27/2024 **Date Expires** 11/27/2026

