



AS IV Serial no: 111642  
Version no: 532B

TEST RECORD 00602

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
11/03/24 19:10 .000  
Subject Test: Man  
23 11/03/24 19:10 .096

Subject Name

test #1

Subject I.D.

Jerry Hargraves 230319  
Operator Name, I.D.

Campbell Police Dept  
Location

Booking room

AS IV Serial no: 111642  
Version no: 532B

TEST RECORD 00603

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
11/03/24 19:11 .000  
Subject Test: Man  
23 11/03/24 19:11 .096

Subject Name

test #

Subject I.D.

Jerry Hargraves 230319  
Operator Name, I.D.

Campbell Police Dept  
Location

Booking room

AS IV Serial no: 111642  
Version no: 532B

TEST RECORD 00604

Temp Date Time <sup>s/</sup> 210L

Air Blank:  
11/03/24 19:13 .000  
Subject Test: Man  
23 11/03/24 19:13 .096

Subject Name

test #3

Subject I.D.

Jerry Hargraves 230319  
Operator Name, I.D.

Campbell Police Dept  
Location

Booking room

AS IV Serial no: 111642  
Version no: 532B

TEST RECORD 00605

Temp Date Time <sup>s/</sup> 210L

VOID: RFI  
12 11/03/24 19:14

Subject Name

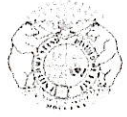
test #4 RFI test

Subject I.D.

Jerry Hargraves 230319  
Operator Name, I.D.

Campbell Police Dept  
Location

Booking room



Paula Nickelson
Acting Director

Michael L. Parson
Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: SD1743 Manufacturer: Guth
Model Number: 10-4D
Agency: CAMPBELL PD
Agency Address: 204 W GRAND, CAMPBELL, MO 63933

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

Table with 3 columns: Simulator Average (34.00), NIST Average (34.03), Combined Uncertainty (.06)

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 12/19/2023
Certification Expiration: 12/19/2024
Simulator testing technician: R. SCHILDKNECHT

Notes on Condition: none
Deviation(s) from method: none

DHSS BAP Scientist Approving: BRIANNA MEDRANO
Certification No: SD1743\_12192023

X [Signature]

DHSS BAP Scientist Approving



# 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.*



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

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**PERMIT**  
**TYPE II**  
**JERRY HARGRAVES**

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 230319

EXPIRES 12/21/2025

*Mike Mason*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Paula J. Nielson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

MO 580.0771 (6-10)

 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 HARGRAVES, JERRY  
Permit No 230319  
Date Issued 12/21/2023 Date Expires 12/21/2025

