



By Tracy Crews at 7:24 am, Jul 15, 2024



ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

46667							
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.							
					NODEOTION		
ALCO SENSOR IV SN	571	NAME OF AGENCY	k Sarvica	,	NSPECTION		
DOI-National Park Service			V OGI NICE		12024		
LOCATION OF INSTRUMENT (STREET AND CITY) Akers Ranger Station-Intersection of Highways K and KK				14:5			
	•			thin established limits.	(Write in observed values		
where determined.) Unm	arked items must be o	corrected before using	instrument.	r			
☑ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)							
\square TEMPERATURE OF ALCO SENSOR (10°C - 40°C) 26°							
PRINTER WORKING	G PROPERLY		*				
TIME AND DATE DI							
BREATH ALCOHOL AC	CURACY STANDARI	DS					
SIMULATOR SOLUT	ΓΙΟΝ		COMPRESSED	ETHANOL-GAS MIXT	URE		
STANDARD SUPPL	IER Guth Laborator	ies Lo	OT # 23180	_ EXP. DATE 05/17/2	2025		
SIMULATOR TEMPE	ERATURE (34°C ± 0.2	2°C) 34.00 SIN	n. sn <u>MP7615</u>	SIM. NIST EXF	P DATE 10/18/2024		
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	Т	EST 2 - , 099	Т.	EST 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	(004)	(.0509)	(.1014)	(.1519)	(OVER .19)		
List any new parts and c established limits (use of	, 1 5 1		as made to restore th	e instrument to operat	e satisfactorily and within		
		*					
	<i>.</i>	ž					
	×						
INSPECTING OFFICER							
SIGNATURE Jude Salle				PRINT NAME Zachary Swindle			
				ELEPHONE NUMBER (573) 351-9645	CONTRACTOR OF THE PROPERTY OF THE SECOND SEC		
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office							

AS IV Serial no: 119571	Version no
5320	TEST RE
TEST RECOND 00134	Temp Dat
Temp Date Time 210L	Air Blank:
	07/12/ Calibratio
Calibration Check:	26 07/12/
Z5 U//1Z/Z4 14:58 .093	Subject Na
Subject Name	L. Swinds
Subject D	730161
23018/8/17/25	Operator N
Operator Name, I.D.	AKERS A
SKERS FANCER STATION	Locat ion
 Locat ion	オング 人
HWY K + KK	
	INTERSE
1 SOFACE COS	

AS IV Serial no: 119571 Version no: 532C TEST RECORD 00136	Temp Date Time 210L Air Blank: 07/12/24 15:01 .000 Calibration Check:		Operator Name, I.D. AKEK, KANCER STATON Location KWN K + KK	LNOEKSEKTON
AS IV Serial no: 119571 Version no: 532C TEST RECORD 00135	Temp Date Time 210L. Air Blank: Air Blank Calibration Check: 26 07/12/24 15:00 .099	Subject Name Z. Swindle Subject 1.D. 230181 8/17/25	Operator Name, 1.D. AKERS RANGER STATEON Location AWY K & KK	INTEKSELTION

\$, \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	TEST RECORD	.000 VOID: RFI 15:02	Subject Name	Subject 1.D. 230/81 8/17/25			12/PCA CE 6702
TEST RECORD 00136	np Date Time 210L	Blank: 07/12/24 15:01 (1brat lon Check: 07/12/24 15:01 (Su, all	30181, 8/17/25	EXT LANGER STATES	ation 17 K + KK	100000000000000000000000000000000000000



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 23180 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on May 18, 2023, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1220% (w/vol) ethyl alcohol. The expiration date for this lot number is May 17, 2025 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 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 FN11172002 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.



Missouri Department of Health and Senior Services

P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466



Paula Nickelson **Acting Director**

Michael L. Parson Governor

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: MP7615

Manufacturer: Guth

Model Number:

12V500

Agency:

NATIONAL PARK SERVICE

Agency Address: 404 WATERCROSS, VAN BUREN, MO 63965

NIST THERMOMETER INFORMATION

Serial Number:

19BMM01308

Bias:

0.00

Uncertainty:

0.02

Date of Certification:

4/20/2023

Date of Expiration: 4/20/2024

ENVIRONMENTAL CONDITIONS

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

VERIFICATION RESULTS

Simulator Average

NIST Average

Combined Uncertainty

34.00

34.00

.02

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing:

10/18/2023

Certification Expiration:

10/18/2024

Simulator testing technician: B. LUTMER

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving:

B. LUTMER

Certification No:

MP7615_10182023

DHSS BAP Scientist Approving

Simulator Calibration Certification Issued by Lab Manager, DHSS BAP

Revision Date: 06/25/2022

Breath Alcohol Program 1903 Northwood Drive, Suite 4 Poplar Bluff, MO 63901

DHSS BAP Document 3.6A Revision 2

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STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES **BREATH ALCOHOL PROGRAM**



PERMIT TYPE II

ZACHARY SWINDLE

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.

DATE8/17/2023	Mike Massur
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230181	
EXPIRES 8/17/2025	Davla J. McCoelson
//O 580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



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

Operator

SWINDLE, ZACHARY

Permit No Date Issued 8/17/2023

Date Expires 8/17/2025

