

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in de Send copy to Department	•	•				ice check, an	d whenev	er instrument is	repaired.
ALCO SENSOR IV SN 100291	6	NAME OF AGENCY Willow Springs Police Department				DATE OF INSPECTION 05/23/2022			
LOCATION OF INSTRUMENT (S 700 W. Main Street, W						TIME OF INSPECTION 10:07 am			
CHECKLIST: Place a mar where determined.) Unma					erating w	ithin establisi	ned limits.	(Write in observe	ed values
DIGITAL READOUT			a using in	Sudment.					
✓ TEMPERATURE OF									
✓ PRINTER WORKING	PROPERLY					·····			
☑ TIME AND DATE DISPLAYING PROPERLY									
BREATH ALCOHOL ACC	CURACY STANDA	RDS			***************************************				
SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE									
STANDARD SUPPLI	ories	LOT#21080 EXF				P. DATE 03/08/2023			
SIMULATOR TEMPE	RATURE (34°C ± 0	0.2°C)33.9	SIM.	sn	/P5539	SIM.	NIST EXF	P DATE 10/13/2	:022
0.080% STANDA	ARD - MUST READ ARD - MUST READ ARD - MUST READ	BETWEEN 0.09 BETWEEN 0.07	5% and (6% and ().105% INC).084% INC	LUSIVE LUSIVE	TACHED			
TEST 1 .102		101. 🕶 TEST 2	EST 2 .101			TEST 3 ☞ .101			
RFI DETECTOR OPE	RATING								
INDICATE THE NUMBER (DO NOT INCLUDE SEL			LOWING	RANGES S	SINCE TH	IE LAST MA	INTENAN	ICE REPORT:	
REFUSALS 0	(004) 0	(.0509)	0 (.1014)	0	(.1519)	0	(OVER .19)	0
List any new parts and d established limits (use oth			n that wa	s made to r	restore th	e instrument	to operat	e satisfactorily a	nd within
INSPECTING OFFICER SIGNATURE WAS EL		Ho 2_			1	RINT NAME Wes Ellison ELEPHONE NUMB			
TYPE II PERMIT NUMBER/EXPIRATION DATE #210025 02/20/2023					I .	(417) 469-3158			
Return completed repor		lcohol Program, I fax, or email.	MO Depa	rtment of H	ealth and	i Senior Serv	ices, Sout	theast District Of	fice

AS IV Serial no: 100291 Version no: 532B

TEST RECORD 00638

Time 210L Temp Date

Air Blank: 05/24/22 10:47 .000 Calibration Check:

23 05/24/22 10:47 .102

Operator Name, I.D.

WILLOW SPINGS PD

AS IV Serial no: 100291 Version no: 532B

TEST RECORD 00639

Time 210L Date Temp

Air Blank:

05/24/22 10:50 .000

Calibration Check: 24 05/24/22 10:50 .101

Subject Name

Operator Name: I.D.

Location

WILLOW SPRINGS PD

AS IV Serial no: 100291 Version no: 532B

TEST RECORD 00640

Temp Date Time 210L

Air Blank:

05/24/22 10:53 .000

Calibration Check:

24 05/24/22 10:53 .101

Subject Name

Subject I.D.

Location

WILLOW SARMES

AS IV Serial no: 100291 Version no: 532B

TEST RECORD 00641

Date VOID: RFI

12 05/24/22 10:55

Sub ject Name

Subject I.D.

Operator Name, I.D.

WILLOW SPRING PD



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 21080 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 10, 2021, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1214% (w/vol) ethyl alcohol. The expiration date for this lot number is March 8, 2023 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 FN03052002 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

Donald G. Kauerauf Director



Michael L. Parson

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:

17KMM00689

Bias:

0.00

Uncertainty:

0.02

12/15/2020 Date of Certification:

Date of Expiration: 12/15/2021

ENVIRONMENTAL CONDITIONS

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

VERIFICATION RESULTS

Simulator Average

NIST Average

Combined Uncertainty

33.99

34.00

.03

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing:

10/13/2021

Certification Expiration:

10/13/2022

Simulator testing technician: M. BOND

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving:

BRIANNA MEDRANO

Certification No:

MP5539_10132021

DHSS BAP Scientist Approving

Simulator Calibration Certification

Issued by Lab Manager, DHSS BAP Revision Date: 05/16/2018

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

DHSS BAP Document 3.6A Revision 1

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STATE OF MISSOURI

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



PERMIT VPE II

WES ELLISON

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.

DATE2/20/2021	Wenter
DAIE	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 210025	
EXPIRES 2/20/2023	Jeff William -
MO 590-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES LAG4 (R6-10



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES EREATH 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 a in Missouri

Operator ELLISON, WES

Permit No 210025

Date Issued 2/20/2021 Date Expires 2/20/2023

