





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 p	preventative maintena	nce check, and when	ever instrument is repaired.	
Send copy to Department of Health and Senior	Services; retain origir	nal in department file.		·	
ALCO SENSOR IV SN 105446	NAME OF AGENCY Lone Jack Police	Department	l l	F INSPECTION 1/2022	
LOCATION OF INSTRUMENT (STREET AND CITY) 401 N Bynum Road, Lone Jack			TIME 0 0:25	F INSPECTION B m	
CHECKLIST: Place a mark in the box by each it where determined.) Unmarked items must be determined.	em if found to be satisf	factory or if operating v	within established limit	s. (Write in observed values	
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)					
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)					
✓ PRINTER WORKING PROPERLY					
✓ TIME AND DATE DISPLAYING PROPERLY					
BREATH ALCOHOL ACCURACY STANDARD					
☑ SIMULATOR SOLUTION		☐ COMPRESSED	ETHANOL CACALL	/TIDE	
	COMPRESSED ETHANOLOGIA MIXTORE				
STANDARD SUPPLIER Guth Laboratorion	es, INC L	OT # 22080	EXP. DATE 03/07	/2024	
SIMULATOR TEMPERATURE (34°C ± 0.2	°C)34.0 SIN	M. SNMP6535	SIM. NIST E	XP DATE 02/01/2023	
 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 1098	ST 2 • .098		TEST 3 ▼ .097		
RFI DETECTOR OPERATING					
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)					
	(.0509)	(.1014)	(.1519) 1	(OVER .19) 0	
List any new parts and describe any alteration established limits (use other side if necessary).	or modification that w	as made to restore th	ne instrument to oper	ate satisfactorily and within	
INSPECTING OFFICER					
SIGNATURE RAM Sign			PRINT NAME Ryan Bird		
210256 11/18/2023			(816) 697-2417		
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office					

N IV Serial [*] no: 105446 Prsion no: 532B	AS IV Serial no: 105446 Version no: 532B
TEST RECORD 00984	TEST RECORD 00986
emp Date Time 210L	Temp Bate Time 21 0L
ir Blank: 10/20/22 00:25 .000 alibration Check: 29 10/28/22 00:25 .098	Air Blank: 18/28/22 00:29 .000 Calibration Check: 30 19/28/22 00:29 .097
ubject Name	Subject Name
Subject I.D. 3.102 #327 Differator Name. I.D. 101 N Bynun Lone Juck Location	Subject 1.D. Bird #377 Operator Name. I.D. 401 NBynum nd Lone Jo Location
AS IV Serial no: 105446 Version no: 532B	AS IV Serial no: 185446 Version no: 5328
Version no: 532B TEST RECORD 00985	Version no: 532B
Version no: 532B	Version no: 532B TEST RECORD 00987 9/
Version no: 532B TEST RECORD 00985 9/ Temp Date Time 210L Air Blank: 18/28/22 00:27 .000	Version no: 532B TEST RECORD 00987 9/
Version no: 532B TEST RECORD 00985 9/ Temp Date Time 210L Air Blank:	Version no: 532B TEST RECORD 00987 s/ Temp Bate Time 2101 VOID: RFI
Version no: 532B TEST RECORD 00985 9/ Temp Date Time 210L Air Blank: 18/28/22 00:27 .000 Calibration Check:	Version no: 532B TEST RECORD 00987 S/ Temp Rate Time 2101 VOID: RFI 12 10/28/22 00:30 Subject Name
Version no: 532B TEST RECORD 00985 9/ Temp Date Time 210L Air Blank: 10/28/22 00:27 .000 Calibration Check: 29 10/28/22 00:27 .098	Version no: 532B TEST RECORD 00987 s/ Temp Date Time 2101 VOID: RFI 12 10/28/22 00:30 Subject Name Subject I.D.
Version no: 532B TEST RECORD 00985 Self Temp Date Time 210L Air Blank: 10/28/22 00:27 .000 Calibration Check: 29 10/28/22 00:27 .098 Subject Name Subject I.D. Ricl #377	Version no: 532B TEST RECORD 00987 Temp Date Time 210I VOID: RFI 12 10/28/22 00:30 Subject Name Subject I.D. Girl, #177 Operator Name, I.D.
Version no: 532B TEST RECORD 00985 3/ Temp Date Time 210L Air Blank: 10/28/22 00:27 .000 Calibration Check: 29 10/28/22 00:27 .098 Subject Name	Version no: 532B TEST RECORD 80987 Temp Bate Time 2101 VOID: RFI 12 10/28/22 00:30 Subject Name Subject I.D. Birl, #177



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 22080 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 9, 2022, 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 7, 2024 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



Michael L. Parson Governor

Richard W. Moore Acting Director

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: MP6535

Manufacturer: Guth

Model Number:

12V500

Agency:

LONE JACK PD

Agency Address: 401 N BYNUM RD, LONE JACK, MO 64070

NIST THERMOMETER INFORMATION

Serial Number:

17KMM00690

Bias:

0.01

Uncertainty:

0.02

Date of Certification:

11/10/2021

Date of Expiration: 11/10/2022

ENVIRONMENTAL CONDITIONS

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

VERIFICATION RESULTS

Simulator Average

NIST Average

Combined Uncertainty .03

34.00

34.01

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing:

2/1/2022

Certification Expiration:

2/1/2023

Simulator testing technician: D. DEBOARD

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving:

BRIANNA MEDRANO

Certification No:

MP6535 212022

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 Page 1 of 1



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



PERMIT TYPE II

RYAN BIRD

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.

DATE11/18/2021	Laura Q Dag
NUMBER 210256	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
EXPIRES 11/18/2023	Thound A. Kamen
AO 580-0771-(6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



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 BIRD, RYAN Permit No 210256

Date Issued 11/18/2021 Date Expires 11/18/2023

