

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 Send copy to Department of Health and Se	e of the regular monthly	preventative mainter	nance check, an	d whene	ver instrument is repaired.	
ALCO SENSOR IV SN 11327	NAME OF AGENCY Lawson Police D	J.	DATE OF 11/02/	INSPECTION		
LOCATION OF INSTRUMENT (STREET AND CITY) 103 W 3rd ST Lawson, MO 64062				TIME OF INSPECTION 4:45 am		
CHECKLIST: Place a mark in the box by each where determined.) Unmarked items must be	ch item if found to be satis	sfactory or if operating	g within establish	ned limits	. (Write in observed values	
DIGITAL READOUT (ALL ELEMENTS		, morramora.				
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)			DECEL	DECEMEN		
PRINTER WORKING PROPERLY				By Tracy Crews at 8:36 am, Nov 02, 2023		
☑ TIME AND DATE DISPLAYING PROPERLY						
BREATH ALCOHOL ACCURACY STANDA						
☑ SIMULATOR SOLUTION	SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE					
STANDARD SUPPLIER Guth Labs	Labs LOT # 22430 EXP. DATE 11/02/2024					
☑ SIMULATOR TEMPERATURE (34°C ±						
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 TEST 2 .099				27.2 = 000		
1.000		TEST 3 .099				
INDICATE THE NUMBER OF BREATH TES (DO NOT INCLUDE SELF-ADMINISTERED	STS IN THE FOLLOWIN	G RANGES SINCE	THE LAST MAII	NTENAN	ICE REPORT:	
REFUSALS (004)	(.0509)	(.1014) 1	(.1519)		(OVER .19)	
List any new parts and describe any alterati established limits (use other side if necessar Adjusted clocked 2 minutes slow	on or modification that v	vas made to restore	the instrument t	o operat	e satisfactorily and within	
INSPECTING OFFICER			PRINT NAME			
· Ju July			Shawn Fields			
220274 12/21/2024			TELEPHONE NUMBER (816) 580-7210			
Return completed report to the: Breath A by mail,	Icohol Program, MO Depfax, or email.	partment of Health an	d Senior Servic	es, Soutl	neast District Office	

AS IV Serial no: 111327
Version no: 532B

TEST RECORD - REPRINT

TEST RECORD 00867

1002 1002

Air Blank:
11/02/23 05:00 .000

Calibration Check:
21 11/02/23 05:00 .099

Subject Name

TEST

Subject I.D.

Operator Name, I.D.

Fields, Shawn 202

Location

Lauson PM

AS IV Serial no: 111327 Version no: 532B

TEST RECORD 00868

Temp Date Time 210L

Air Blank:
11/02/23 05:03 .000

Calibration Check:
22 11/02/23 05:03 .099

Subject Name

Subject J.D.

Operator Name, I.D.

Fields, Shacn 20

Lanson PD

AS IV Serial no: 111327 Version no: 532B

TEST RECORD 00869

Temp Date Time 210L

Air Blank:

11/02/23 05:04 .000 Calibration Check:

23 11/02/23 05:04 .099

Subject Name TEST

Subject J.D.

Operator Name, I.D.

Fields, Shown 202

Lanson PD

AS IV Serial no: 111327 Version no: 532B

TEST RECORD 00870

Temp Date Time 210L

VOID: RFI 12 11/02/23 05:05

Subject Name

Subject I.D.

Operator Name, I.D.

Fields Showa 20

Location '

Lauson Pl



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



PERMIT TYPE II

SHAWN FIELDS

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

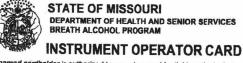
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE ____12/21/2022 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 220274 EXPIRES 12/21/2024

MO 580-0771 (6-10)

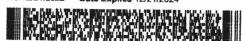
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)



FIELDS, SHAWN

220274 12/21/2022





CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 22430 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **December 1, 2022,** using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1216% (w/vol) ethyl alcohol. The expiration date for this lot number is **November 30, 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.