



ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

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.

ALCO SENSOR IV SN 111738	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 12/07/2023
LOCATION OF INSTRUMENT (STREET AND CITY) 6012 NE Antioch Road, Gladstone, MO 64119		TIME OF INSPECTION 11:30 am

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)
<input checked="" type="checkbox"/> TEMPERATURE OF ALCO SENSOR (10°C - 40°C)
<input checked="" type="checkbox"/> PRINTER WORKING PROPERLY
<input checked="" type="checkbox"/> TIME AND DATE DISPLAYING PROPERLY

BREATH ALCOHOL ACCURACY STANDARDS

<input checked="" type="checkbox"/> SIMULATOR SOLUTION	<input type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER RepCo Marketing Co	LOT # 22430 EXP. DATE 11/30/2024
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.00	SIM. SN MP2424 SIM. NIST EXP DATE 11/27/2024

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)

<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 • .100	TEST 2 • .101	TEST 3 • .101
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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	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).
Adjusted time for Daylight Savings

INSPECTING OFFICER

SIGNATURE 	PRINT NAME Cpl. B. E. Thoman #1256
TYPE II PERMIT NUMBER/EXPIRATION DATE 220146 05/16/2024	TELEPHONE NUMBER (816) 622-0800

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 111738
Version no: 532B

TEST RECORD 00197

Temp Date Time ^{s/} 210L

Air Blank:
12/07/23 11:29 .000
Calibration Check:
21 12/07/23 11:29 .100

Subject Name
MAINT TEST #1

Subject I.D.

Operator Name, I.D.

CR. BE. THOMAN 22046

Location

CLAY CO. Z.O.

AS IV Serial no: 111738
Version no: 532B

TEST RECORD 00198

Temp Date Time ^{s/} 210L

Air Blank:
12/07/23 11:30 .000
Calibration Check:
22 12/07/23 11:30 .101

Subject Name
MAINT TEST #2

Subject I.D.

Operator Name, I.D.

CR. BE. THOMAN 22046

Location

CLAY CO. Z.O.

AS IV Serial no: 111738
Version no: 532B

TEST RECORD 00199

Temp Date Time ^{s/} 210L

Air Blank:
12/07/23 11:32 .000
Calibration Check:
23 12/07/23 11:32 .101

Subject Name
MAINT TEST #3

Subject I.D.

Operator Name, I.D.

CR. BE. THOMAN 22046

Location

CLAY CO. Z.O.

AS IV Serial no: 111738
Version no: 532B

TEST RECORD 00200

Temp Date Time ^{s/} 210L

VOID: RFI
12 12/07/23 11:33

Subject Name
RFI TEST

Subject I.D.

Operator Name, I.D.

CR. BE. THOMAN 22046

Location

CLAY CO. Z.O.



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 22430 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on December 1, 2022, using a Perkin Elmer Gas Chromatograph Autosystem XI, 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 Certified 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.*



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

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PERMIT
TYPE II
BRUCE E. THOMAN

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.

DATE 5/16/2022

NUMBER 220146

EXPIRES 5/16/2024

Mike Masman

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

David J. Nickelson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

 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 THOMAN, BRUCE
 Permit No 220146
 Date Issued 5/16/2022 Date Expires 5/16/2024

