



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 STATE PUBLIC HEALTH LABORATORY  
**ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT**

RECEIVED  
 By Tracy Crews at 7:36 am, Sep 26, 2023

**ORIGINAL**

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 119737	NAME OF AGENCY MARYVILLE POLICE DEPARTMENT	DATE OF INSPECTION 09/26/2023
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LOCATION OF INSTRUMENT (STREET AND CITY) 101 N. VINE STREET, MARYVILLE, MO 64468	TIME OF INSPECTION 3:46 am
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**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.

DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

TEMPERATURE OF ALCO SENSOR (10°C - 40°C)

PRINTER WORKING PROPERLY

TIME AND DATE DISPLAYING PROPERLY

**BREATH ALCOHOL ACCURACY STANDARDS**

SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER GUTH LOT # 22430 EXP. DATE 11/30/2024

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34 SIM. SN SD2281 SIM. NIST EXP DATE 08/18/2024

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)

- 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  .104

TEST 2  .103

TEST 3  .103

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).

**INSPECTING OFFICER**

SIGNATURE

PRINT NAME

WAYNE L. WILSON

TYPE II PERMIT NUMBER/EXPIRATION DATE

220286 / 12/21/2024

TELEPHONE NUMBER

(660) 562-3209

**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: 119737  
Version no: 532C

TEST RECORD 00063

Temp Date Time <sup>g/</sup>21OL

Air Blank:  
09/26/23 03:46 .000  
Calibration Check:  
21 09/26/23 03:46 .104

Subject Name  
Test #1

Subject I.D.  
Wayne Wilson/220286

Operator Name, I.D.  
101 N. Vine St.

Location  
Maryville, MO 64468

AS IV Serial no: 119737  
Version no: 532C

TEST RECORD 00064

Temp Date Time <sup>g/</sup>21OL

Air Blank:  
09/26/23 03:48 .000  
Calibration Check:  
22 09/26/23 03:48 .103

Subject Name  
Test #2

Subject I.D.  
Wayne Wilson/220286

Operator Name, I.D.  
101 N. Vine St.

Location  
Maryville, MO 64468

AS IV Serial no: 119737  
Version no: 532C

TEST RECORD 00065

Temp Date Time <sup>g/</sup>21OL

Air Blank:  
09/26/23 03:49 .000  
Calibration Check:  
23 09/26/23 03:49 .103

Subject Name  
Test #3

Subject I.D.  
Wayne Wilson/220286

Operator Name, I.D.  
101 N. Vine St.

Location  
Maryville, MO 64468

AS IV Serial no: 119737  
Version no: 532C

TEST RECORD 00066

Temp Date Time <sup>g/</sup>21OL

VOID: RFI  
12 09/26/23 03:51

Subject Name  
RFI Test

Subject I.D.  
Wayne Wilson/220286

Operator Name, I.D.  
101 N. Vine St.

Location  
Maryville, MO 64468

AS IV Serial no: 119737  
Version no: 532C

TEST RECORD 00067

Temp Date Time <sup>g/</sup>21OL

Air Blank:  
09/26/23 03:52 .000  
Subject Test: Auto  
25 09/26/23 03:52 .000

Subject Name  
Self Test

Subject I.D.  
Wayne Wilson/220286

Operator Name, I.D.  
101 N. Vine St.

Location  
Maryville, MO 64468



**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

**ORIGINAL**

## 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  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L  $\pm$  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.

ORIGINAL



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

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**PERMIT**  
**TYPE II**  
**WAYNE L. WILSON**

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

NUMBER 220286

EXPIRES 12/21/2024

*Mike Mason*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Dave J. Nickelson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-6771 (6-10)

LAB-1 (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 WILSON, WAYNE  
Permit No 220286  
Date Issued 12/21/2022 Date Expires 12/21/2024

