



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 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 <b>087974</b>	NAME OF AGENCY <b>Oregon County Sheriff's Office</b>	DATE OF INSPECTION <b>01/26/2024</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>Oregon County Sheriff's Office #1 Court Square Alton, Mo 65606</b>		TIME OF INSPECTION <b>1734</b>

**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 Lab LOT # 23180 EXP. DATE 05/17/2025

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34 SIM. SN MP6537 SIM. NIST EXP DATE 05/23/2024

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 ← **.099**

TEST 2 ← **.098**

TEST 3 ← **.096**

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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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).

RECEIVED  
By Tracy Crews at 7:35 am, Jan 29, 2024

**INSPECTING OFFICER**

SIGNATURE <i>Deputy J.A. Martin</i> DSN 4064	PRINT NAME <b>Deputy J.A. Martin DSN 4064</b>
TYPE II PERMIT NUMBER/EXPIRATION DATE <b>230107 / 05/30/2025</b>	TELEPHONE NUMBER <b>(417) 778-6611</b>

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

01/26/24 17:34 .000  
Calibration Check:  
01/26/24 17:34 .099

Subject Name  
Test 1

Subject I.D.  
Maintenance

Operator Name, I.D.  
J.M.M 41064

Location  
O.C.S.O. Altan, MD

#1 Court Square

AS IV Serial no: 087974  
Version no: 532B

TEST RECORD 00290  
Temp Date Time 210L

Air Blank:  
01/26/24 17:36 .000

Calibration Check:  
25 01/26/24 17:36 .098

Subject Name  
Test 2

Subject I.D.  
Maintenance

Operator Name, I.D.  
J.M.M 41064

Location  
O.C.S.O Altan, MD

#1 Court Square

AS IV Serial no: 087974  
Version no: 532B

TEST RECORD 00291  
Temp Date Time 210L

Air Blank:  
01/26/24 17:38 .000

Calibration Check:  
26 01/26/24 17:38 .096

Subject Name  
Test 3

Subject I.D.  
Maintenance

Operator Name, I.D.  
J.M.M 41064

Location  
O.C.S.O - Altan, MD

#1 Court Square

AS IV Serial no: 087974  
Version no: 532B

TEST RECORD 00293  
Temp Date Time 210L

VOID: RFI  
12 01/26/24 17:41

Subject Name  
R.F.E

Subject I.D.  
Maintenance

Operator Name, I.D.  
J.M.M DSN 41064

Location  
O.C.S.O - Altan MD

#1 Court Square



**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 23180 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on May 18, 2023, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1220% (w/vol) ethyl alcohol. The expiration date for this lot number is May 17, 2025 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 FN11172002 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**

**JAMES A. MARTIN**

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 5/30/2023

NUMBER 230107

EXPIRES 5/30/2025

*Mike Mason*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*David J. Dickerson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (5-10)

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 **MARTIN, JAMES**  
Permit No **230107**  
Date Issued **5/30/2023**    Date Expires **5/30/2025**

