



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 111773	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 01/03/2024
LOCATION OF INSTRUMENT (STREET AND CITY) Zone 04/15 Office - 275 B Southwest Outer Road, Branson		TIME OF INSPECTION 9:11 pm

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 Laboratories LOT # 23180 EXP. DATE 05/17/2025

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 33.99 SIM. SN MP2422 SIM. NIST EXP DATE 12/05/2024

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 ← .097

TEST 2 ← .096

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	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
----------	---	---------	---	-----------	---	-----------	---	-----------	---	------------	---

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 Brandon Hall
TYPE II PERMIT NUMBER/EXPIRATION DATE 230011 / 01/24/2025	TELEPHONE NUMBER (417) 895-6868

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



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 $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, 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 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.

AS IV Serial no: 111773
Version no: 532B

TEST RECORD 00177

Temp	Date	Time	s/	210L
Air Blank:	01/03/24	21:11	.000	
Calibration Check:	21	01/03/24	21:11	.097

Subject Name

Acc Check

Subject I.D.

Brandon Hall 347

Operator Name, I.D.

Zone 4/15 office

Location

Branson

AS IV Serial no: 111773
Version no: 532B

TEST RECORD 00178

Temp	Date	Time	s/	210L
Air Blank:	01/03/24	21:17	.000	
Calibration Check:	23	01/03/24	21:17	.096

Subject Name

Acc Check

Subject I.D.

Brandon Hall 347

Operator Name, I.D.

Zone 4/15 office

Location

Branson

AS IV Serial no: 111773
Version no: 532B

TEST RECORD 00179

Temp	Date	Time	s/	210L
Air Blank:	01/03/24	21:20	.000	
Calibration Check:	23	01/03/24	21:20	.096

Subject Name

Acc Check

Subject I.D.

Brandon Hall 347

Operator Name, I.D.

Zone 4/15 office

Location

Branson

AS IV Serial no: 111773
Version no: 532B

TEST RECORD 00180

Temp	Date	Time	s/	210L
VOID: RFI	12	01/03/24	21:21	

Subject Name

Acc Check

Subject I.D.

Brandon Hall 347

Operator Name, I.D.

Zone 4/15 office

Location

Branson