

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES

STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

REPORT #7

By Tracy Crews at 3:22 pm, Jan 11, 2024

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 //957/	NAME OF AGENCY DOI-National Par	rk Service	DATE OF	INSPECTION /2024	
LOCATION OF INSTRUMENT (STREET AND CITY) Akers Ranger Station-Intersection of Highways K and KK			125.		
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 STANDARD	DS				
✓ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE					
STANDARD SUPPLIER Guth Laboratories LOT # 23180 EXP. DATE 05/17/2025					
SIMULATOR TEMPERATURE (34°C \pm 0.2°C) $34/00$ SIM. SN MP7615 SIM. NIST EXP DATE 10/18/2024					
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 ★	EST 2 099		TEST 3 ► , 099		
☐ RFI DETECTOR OPERATING				,	
INDICATE THE NUMBER OF BREATH TESTS (DO NOT INCLUDE SELF-ADMINISTERED T		G RANGES SINCE	THE LAST MAINTENAI	NCE REPORT:	
REFUSALS (004)	(.0509)	(.1014)	(.1519)	(OVER .19)	
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		
· Trak Spe			Zachary Swindle		
TYPE II PERMIT NUMBER/EXPIRATION DATE 230181 08/17/2025			TELEPHONE NUMBER (573) 351-9645		
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: 119571 Version no: 532C TEST RECORD 00087 Temp Date Time 210L VOID: RFI 12 G1/11/24 13:01 Subject Name ZACK SWINGK Subject 1.D. Z30/\$1 \$1/7/25 Operator Name: 1.D. ARKS AMCH STREW Location ANW K AND KK	NV OL TEN NO
AS IV Serial no: 119571 Version no: 532C TEST RECORD 00086 Temp Date Time 210L Air Blank: 01/11/24 13:00 .000 Calibration Check: 21 01/11/24 13:00 .099 Subject Name ZAKK SW/MDK Subject I.D. Z30/8/ \$/17/25 Operator Name./ I.D. AKENS KAWER SW/MSC Location HWY K ANO KK	(NFERSECTION
AS IV Serial no: 119571 Version no: 532c TEST RECORD 00085 Temp Date Time 290L Air Blank: 01/11/24 12:58 .000 Calibration Check: 20 01/11/24 12:58 .099 Subject Name ZACK SWINGR Subject I.D. ZZUJZ SINGR Subject I.D. ZZUJZ SINGR Location HWAS LANGR STATEN Location	INTERS FROM
AS IV Serial no: 119571 Version no: 532C TEST RECORD 00084 Temp Date Time 210L Air Blank: Calibration Check: 099 Subject Name Subject 1.D. Z30/8/ 8/7/25 OPERATOR AME I.U. Location Hwy K Arp KK	INTERSECTEN



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



PERMIT TYPE II

ZACHARY SWINDLE

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

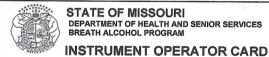
ALCO-SENSOR IV WITH PRINTER, INTOX DMT

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 8/17/2023	Mike Masson
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230181	
EXPIRES 8/17/2025	Davla I. Nichelson
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



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 SV

SWINDLE, ZACHARY

Permit No 230181 Date Issued 8/17/2023

Date Expires 8/17/2025

