



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 035714	PRINTER SN 092.3576.249	DATE OF INSPECTION 12/15/2024
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LOCATION OF INSTRUMENT (STREET AND CITY) 203 Veterans Memorial Parkway, Wright City, Missouri, 63390	TIME OF INSPECTION 9:12 pm
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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 Laboratories LOT # 23390 EXP. DATE 10/17/2025

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0C SIMULATOR SN SD2745 SIMULATOR EXP DATE 05/08/2025

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  .101

TEST 2  .102

TEST 3  .102

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) 1	(.10-.14)	(.15-.19) 1	(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).

**INSPECTING OFFICER**

SIGNATURE 104

PRINT NAME  
Greg Monroe

TYPE II PERMIT NUMBER/EXPIRATION DATE  
230040 03/09/2025

TELEPHONE NUMBER  
(636) 745-3541

**Return completed report to the:** Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
 2875 James Boulevard  
 Poplar Bluff, MO 63901

AS IV Serial no: 035714  
Version no: 532B

TEST RECORD 01603  
Temp Date Time 210L

VOID: RFI  
12/15/24 21:18  
Subject Name  
Monroe 104  
230040  
Subject I.D.

Monroe 104 230040  
Operator Name, I.D.  
Wright City PD  
Location

AS IV Serial no: 035714  
Version no: 532B

TEST RECORD 01602  
Temp Date Time 210L

Air Blank:  
12/15/24 21:17 .000  
Calibration Check:  
23 12/15/24 21:17 .102  
Subject Name  
Monroe 104

230040  
Subject I.D.  
Monroe 104 230040  
Operator Name, I.D.

Wright City PD  
Location

AS IV Serial no: 035714  
Version no: 532B

TEST RECORD 01601  
Temp Date Time 210L

Air Blank:  
12/15/24 21:14 .000  
Calibration Check:  
22 12/15/24 21:14 .102  
Subject Name  
Monroe 104

230040  
Subject I.D.  
Monroe 104 230040  
Operator Name, I.D.

Wright City PD  
Location

AS IV Serial no: 035714  
Version no: 532B

TEST RECORD 01600  
Temp Date Time 210L

Air Blank:  
12/15/24 21:12 .000  
Calibration Check:  
21 12/15/24 21:12 .101  
Subject Name  
Monroe 104

230040  
Subject I.D.

Monroe 104 230040  
Operator Name, I.D.  
Wright City PD  
Location

AS IV Serial no: 035714  
Version no: 532B

TEST RECORD 01660

Temp Date Time 210L

Air Blank: 12/15/24 21:12 .000  
Calibration Check: 21 12/15/24 21:12 .101  
Monroe 104

Subject Name  
230040

Subject I.D.  
Monroe 104, 230040

Operator Name: I.D.  
Wright City PD

Location

AS IV Serial no: 035714  
Version no: 532B

TEST RECORD 01661

Temp Date Time 210L

Air Blank: 12/15/24 21:14 .000  
Calibration Check: 22 12/15/24 21:14 .102  
Monroe 104

Subject Name  
230040

Subject I.D.  
Monroe 104, 230040

Operator Name: I.D.  
Wright City PD

Location

AS IV Serial no: 035714  
Version no: 532B

TEST RECORD 01662

Temp Date Time 210L

Air Blank: 12/15/24 21:17 .000  
Calibration Check: 23 12/15/24 21:17 .102  
Monroe 104

Subject Name  
230040

Subject I.D.  
Monroe 104, 230040

Operator Name: I.D.  
Wright City PD

Location

AS IV Serial no: 035714  
Version no: 532B

TEST RECORD 01663

Temp Date Time 210L

VOID: RPI  
12 12/15/24 21:18  
Monroe 104

Subject Name  
230040

Subject I.D.  
Monroe 104, 230040

Operator Name: I.D.  
Wright City PD

Location



## GUTH LABORATORIES, INC.

690 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 **23390** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **October 18, 2023**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1207%** (w/vol) ethyl alcohol. The expiration date for this lot number is **October 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 FN03072301 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**  
**GREGORY D. MONROE**

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 3/9/2023

NUMBER 230040

EXPIRES 3/9/2025

*Mike Massum*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Paula L. Nielson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

 **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** MONROE, GREGORY  
**Permit No** 230040  
**Date Issued** 3/9/2023 **Date Expires** 3/9/2025

