

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

7279747									
Complete this report in dup Send copy to Department of						nce check, and whene	ver instrument is	repaired.	
ALCO SENSOR IV SN 087971		NAME OF AGENCY CARROLLTON POLICE DEPARTM					DATE OF INSPECTION 06/04/2024		
LOCATION OF INSTRUMENT (ST 1320 US 65 N., CARRO	333					TIME OF INSPECTION 7:47 P.M.			
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 ACC	URACY STANDAF	DS							
☑ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE									
STANDARD SUPPLIER GUTH LABS INC. LOT # 22430 EXP. DATE 11/30/2024									
SIMULATOR TEMPER	RATURE (34°C ± 0	.2°C) <u>33.9</u> 9	9 sı	M. SN	1P294() SIM. NIST EX	(P DATE 09/19/2	024	
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 ★ .103		TEST 2 .102				TEST 3 .102			
☑ RFI DETECTOR OPERATING									
INDICATE THE NUMBER (DO NOT INCLUDE SELF			LLOWIN	IG RANGES S	INCE T	HE LAST MAINTENA	NCE REPORT:		
REFUSALS 0	(004) 1	(.0509)	0	(.1014)	1	(.1519)	(OVER .19)	0	
List any new parts and de			on that	1	estore 1			nd within	
established limits (use other	•		on mar	nao maao to t	00.010	ino monumom to opon	aro outroriciny a		
Maintenance conducted in accordance with DHSS standards.									
mamionanoo oonaaoto	2 111 G0001 GG1 100 V	min Di 100 dia	maarao	•					
INSPECTING OFFICER									
SIGNATURE			PRINT NAME WILLIAM BAGER						
TYPE II PERMIT NUMBER/EXPIRATION	7				TELEPHONE NUMBER				
230029/2-17-2025					(660) 542-3128				
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.									

CARROLLTON POLICE DEPARTMENT-BREATH ALCOHOL PROGRAM

W. BARGER #230029 1320 N US 65 CARROLLTON MO 64633	C
W. BARGER #230029 1320 N US 65 CARROLLTON, mo. 64633	Tenr Dete Time 2022 Rin Blank: 26/24/24 1949 .222 Rin Sieri Ners 25/24/24 1949 .222 Rinds Rin Ners 25/24/24 1949 .222
W. BARCER #130029 1320 N US 65 CARROLLTON, MO 64633	## 1
W.BARGER #230029 1320 N US 65 LARROLLTON, MC, 64633	

Carrollton Police Department AS-IV Monthly Maintenance Report

TEST# 1

AS-IV S/N: 087971 Type II Permit Holder: William Barger #230029-Exp: 02/17/2025 Date of Maintenance Report: 6/4/2024

TEST #2

TEST #3

RFI TEST

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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 Devember 1, 2022, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.1216% (w/vol) othyl 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°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 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.



MQ 680-0771 (6-10)

STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM



LAB-4 (R\$-10)

PERMIT TYPE II

WILLIAM BARGER

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. Mile Massimin DATE ____2/17/2023_ DIFFECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 230029 Daven J. Malaskon EXPIRES 2/17/2025 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



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

INSTRUMENT OPERATOR CARD

The named caphibitor is enthroized to operate an evidential breath alcohol instrument for the determination of the ekoholia content in breath form of explied all in Missouri.

BARGER, WILLIAM Operator

Permit No 230028 Date Issued 2/17/2023 Date Expires 2/17/2025

