

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Carried Control				
Complete this report in duplicat Send copy to Department of He			nance check, and whenever instrument is reple.	paired.
ALCO SENSOR IV SN 087976	NAME OF Misso	AGENCY uri State Highway Patro	DATE OF INSPECTION 11/29/2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 3131 E Kearney, Springfield, Missouri 65803			TIME OF INSPECTION 14:18	
		to be satisfactory or if operating	g within established limits. (Write in observed	values
where determined.) Unmarked i			g William Catabilation million (William Catabilities	
✓ DIGITAL READOUT (ALL E	ELEMENTS OPERATIONA	L)		
TEMPERATURE OF ALCO	SENSOR (10°C - 40°C)			
PRINTER WORKING PRO	PERLY			
TIME AND DATE DISPLAY	ING PROPERLY			
BREATH ALCOHOL ACCURA	CY STANDARDS			
✓ SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE				
STANDARD SUPPLIER G	outh Laboratories, INC	LOT # 24310	EXP. DATE 08/27/2026	
SIMULATOR TEMPERATU			SIM. NIST EXP DATE 12/05/20	24
less. Check the box corresp 0.100% STANDARD - 0.080% STANDARD -	onding to the standard sol MUST READ BETWEEN (MUST READ BETWEEN (ution being used. (PRINTOUT 0.095% and 0.105% INCLUSIN 0.076% and 0.084% INCLUSIN 0.038% and 0.042% INCLUSIN	/E /E	vectors 535 550
TEST 1 ▼ .101	TEST 2 € _ 1	100	TEST 3 - .098	
RFI DETECTOR OPERATION	NG .			
INDICATE THE NUMBER OF E		OLLOWING RANGES SINCE	THE LAST MAINTENANCE REPORT:	
REFUSALS (004	(.0509)	(.1014)	(.1519) (OVER .19)	
List any new parts and describe	e any alteration or modifica	ation that was made to restore	e the instrument to operate satisfactorily and	within
established limits (use other sid			s are menoment to operate equicationly and	,,,,,,,,,,,
Chan	ged t	ime +	1 minute	3
INSPECTING OFFICER SIGNATURE			PRINT NAME	
	27		D W Henley #727	
TYPE II PERMIT MUMBER/EXPIRATION DATE		1001000	TELEPHONE NUMBER	
TYPE II PERMITMUMBERVEXPIRATION DATE	240144 exp 6	/28/2026	(417) 895- 6868	

AS IV Serial no: 087976
Uersion no: 5328

TEST RECORD 00553

Temp Date Time 2101

Air Blank:
11/29/24 14:20 .000
Calibration Check:
20 11/29/24 14:20 .101

Subject Name

TEST 2

Subject I.D.

DEPERATOR NAME, I.D.

D. L. HENDEY#732

LOCATION

313) E KEARNEY

Sparwfield, mo

AS IV Serial no: 087976 Version no: 532B

TEST RECORD 00554

Temp Date Time 2101

Air Blank:

11/29/24 14:21 .000 Calibration Check: 21 11/29/24 14:21 .100

Subject Name

TEST 2 Subject I.D.

Operator Name, I.D.

O W HENKY #727

Location

313) E KEAQNEY

200 (1) 313 AND

AS IV Serial no: 087976
Version no: 532B
TEST RECORD 00555

Temp Date Time 210L Air Blank: 11/29/24 14:23 .000

Til 11/29/24 14:23 .000 Calibration Check: 22 11/29/24 14:23 .098

TEST 3

Subject I.D.

Deperator Name, I.D.

D W HENLEY # 727

Location

313) E KEARNEY

Sparwfield, MO

AS IV Serial no: 087976 Version no: 532B

TEST RECORD 00556

S/
Temp Date Time 2101

UOID: RFI
12 11/29/24 14:25

Subject Name RFT Subject I.D.

Spermofield, mo



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 24310 of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on August 28, 2024, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.1209% (w/vol) ethyl alcohol. The expiration date for this lot
number is August 27, 2026 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 FN03072301 whose values are traceable to NIST.

All balances are calibrated annually by an outside agency using NIST traceable weights.

-Culibration 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

DAVID W. HENLEY, JR.

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. Mike Massur DATE ___6/28/2024 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 240144 Daves I. Nichelson EXPIRES 6/28/2026 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES LAB-4 (R6-10) MO 580-0771 (6-10)



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

Operator HENLEY, JR., DAVID

Permit No 240144

Date Expires 6/28/2026 Date Issued 6/28/2024

