

# MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

#### ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

MARCELL						
Complete this report in de Send copy to Department					ver instrument is repaired.	
ALCO SENSOR IV SN 097422		NAME OF AGENCY Newton County S	Sheriff's Office	DATE OF 06/14/	INSPECTION 2024	
LOCATION OF INSTRUMENT (\$ 208 W Coler Street, No				TIME OF 10:50	INSPECTION am	
				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 AC	CURACY STANDA	RDS				
☑ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE						
✓ STANDARD SUPPLIER Guth Laboratories, Inc. LOT # 23390 EXP. DATE 10/17/2025						
SIMULATOR TEMPERATURE (34°C $\pm$ 0.2°C)34.0 SIM. SN DR 6930 SIM. NIST EXP DATE $\underline{07/24/2024}$						
0.080% STANDA	ARD - MUST READ	D BETWEEN 0.095% and D BETWEEN 0.076% and D BETWEEN 0.038% and	0.084% INCLUSIVE			
TEST 1  € .099		TEST 2 <b>☞</b> .098		TEST 3 <b>☞</b> .098		
RFI DETECTOR OPE	ERATING					
INDICATE THE NUMBER (DO NOT INCLUDE SEL			G RANGES SINCE	THE LAST MAINTENA	NCE REPORT:	
REFUSALS	(004)	(.0509)	(.1014)	(.1519)	(OVER .19)	
List any new parts and d established limits (use oth			vas made to restore	the instrument to opera	te satisfactorily and within	
INSPECTING OFFICER						
SIGNATURE					PRINT NAME Taylor Lombard	
TYPE II PERMIT NUMBER/EXPIRATI 230169 08/08/2025	ON DATE			TELEPHONE NUMBER (417) 451-8300		
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: 097422 Version no: 532B

TEST RECORD 00702

gya ka ri**m**er ingn sa

Temp Date Time 210L

Air Blank:

06/14/24 10:56 .000

Calibration Check:

20 06/14/24 10:56 .099

Subject Name

lest

Subject I.D.

Test / Operator Name, I.D.

Taylor Comband 7,30169

Location

208 W Coler St

Weosho, MO 64850

AS IV Serial no: 097422 Version no: 532B

TEST RECORD - REPRINT

TEST RECORD 00704

Temp Date Time 210L

Air Blank:

06/14/24 11:00 .000

Calibration Check:

22 06/14/24 11:00 .098

Subject Name

lest

Subject I.D.

Operator Name, I.D.

Toylor Combard 230169

208 W Coler St

Neosho, MO 64830

AS IV Serial no: 097422 Version no: 532B

TEST RECORD 00703

Temp Date Time 210L

Air Blank:

06/14/24 10:58 .000

Calibration Check: 22 06/14/24 10:58 .098

Subject Name

Test

Subject I.D.

Operator Name, I.D.

Taylor Comband 230169 Location

808 W Coler St

Weosho, MO 64150

AS IV Serial no: 097422 Version no: 532B

TEST RECORD 00705

Temp Date Time 210L

UOID: RFI 12 06/14/24 11:03

Subject Name

Test

Subject I.D.

REZ

Operator Name, I.D.

Jaylor Comband 230169

Location

ZOR W Coler St

weosho, 410 64851



#### 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°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 Cerillians 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.



MQ 580-0771 (8-10)

### STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



LAS-4 (PB-10)

## PERMIT TYPE II

## TAYLOR LOMBARD

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 defermination 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 8/8/2023 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 230169 EXPIRES 8/8/2025 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 sicchol instrument for the determination of the alcoholic content in breath form of expired all in Miscourt.

Operator LOMBARD, TAYLOR

Permit No 230169

Date Issued 8/8/2023 Date Expires 8/8/2025

