

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

-01(12-					
Complete this report in duplicate at the time of Send copy to Department of Health and Senio				ever instrument is repaired.	
ALCO SENSOR IV SN 097460	NAME OF AGENCY Battlefield Police	Department	DATE 0 05/17	FINSPECTION /2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 5021 S State Hwy FF Battlefield, MO 65619			TIME OF 9:00 a	INSPECTION am	
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 STANDAR	DS				
☑ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE				TURE	
STANDARD SUPPLIER Guth Laboratories, Inc. LOT # 23390 EXP. DATE 10/17/2025					
☑ SIMULATOR TEMPERATURE (34°C ± 0.	2°C) 34 SIM	л. SNSD 225	1 SIM. NIST EX	(P DATE 10/16/2024	
Run three tests using a standard solution. less. Check the box corresponding to the control of t	standard solution being BETWEEN 0.095% and BETWEEN 0.076% and	used. (PRINTOUT A 0.105% INCLUSIVE 0.084% INCLUSIVE	ATTACHED) E E	'	
TEST 1 ★ .095	FEST 2 ▼ .096	MANAGEMENT OF THE PROPERTY OF	TEST 3 ☞ .097		
☑ 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 (004) 0	(.0509) 0	(.1014) 0	(.1519) 0	(OVER .19) 0	
List any new parts and describe any alteration established limits (use other side if necessary)		as made to restore	the instrument to opera	ate satisfactorily and within	
INSPECTING OFFICER SIGNATURE			PRINT NAME		
SIGNATURE MILES MILES			Tyler Moss		
TYPE II PERMIT NUMBER/EXPIRATION DATE Number: 220182 Expires: 07/13/2024			TELEPHONE NUMBER (417) 890-9876		
Return completed report to the: Breath Alc by mail, fa	cohol Program, MO Dep ax, or email.	partment of Health ar	nd Senior Services, Sou	utheast District Office	

AS IV Serial no: 097460
Version no: 532B

TEST RECORD 01409

Temp Date Time 210L

Air Blank:
 05/17/24 09:58 .000

Subject Test: Auto
 24 05/17/24 09:58 .095

Subject Name

Tyler Moss

Subject I.D.

Dool82 7/3/24

Deerator Name, I.D.

Subject I.D.

Location

Subject I

Version no: 532B

TEST RECORD 01411

Temp Date Time 210L

Air Blank: 05/17/24 10:03 .000

Subject Test: Auto 24 05/17/24 10:03 .097

Subject Name

Tyler MOSS

Subject I.D.

Lyolk 2 7/13/24

Drerator Name: I.D.

S/17/24

Location

BALALFRAD PD

AS IV Serial no: 097460

AS IV Serial no: 097460
Version no: 532B

TEST RECOVED 01412

Serial no: 097460

Description of the properties of the pr



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 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.

THE STATE OF MISSOURI)
COUNTY OF GREENE	Ś

AFFIDAVIT

Before me, the undersigned authority, personally appeared **Tyler A. Moss**, who, being by me duly sworn, deposed as follows:

My name is **Tyler A. Moss**, I am of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated:

I am the custodian of records for Type II maintenance reports for the **Battlefield Police Department**. Attached hereto is/are 4 pages of records that are kept by me in the regular course of business, and it was in the regular course of business of maintaining the ASIV w/ Printer instrument as an employee of the **Battlefield Police Department** with knowledge of the act, event, condition, opinion, or diagnosis recorded or to transmit information thereof to be included in such record; and the record was made at or near the time of the act, event, condition, opinion of diagnosis. The records attached hereto are the original or exact duplicate of the originals of the 05/17/2024 Alco-Sensor IV with printer report.

In witness whereof, I have hereunto subscribed my name and affixed my official seal this 17 day of 90, 90, 90, 90, 90, 90

Notary Public

CAITLIN VILLALOBOS
Notary Public — Notary Seel
STATE OF MISSOUR!
Greene County
My Commission Expires Oct. 25, 2025
Commission #21080245



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE II

TYLER MOSS

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

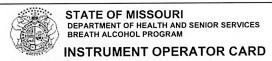
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections

577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.	M = M = M
DATE	Mile Massive DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 220182	Davla J. Nichelson
EXPIRES 7/13/2024	Tured -s. 1 percellon

MO 580-0771 (6-10)

LAB-4 (R6-10)

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired all in Microsity.

Operator

MOSS, TYLER

Permit No 220182 Date Issued 7/13/2022

Date Expires 7/13/2024

