



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES By Tracy Crews at 12:00 pm, Aug 06, 2024 STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

4.10-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-						
Complete this report in duplicate at the time Send copy to Department of Health and Ser				henever instrument is repaired		
ALCO SENSOR IV SN 099361	NAME OF AGENCY Carroll County S	heriff's Office	3	TE OF INSPECTION 8/03/2024		
LOCATION OF INSTRUMENT (STREET AND CITY) 106 S. Folger St, Carrollton			TII	ME OF INSPECTION :26 am		
CHECKLIST: Place a mark in the box by eac where determined.) Unmarked items must b			within established	limits. (Write in observed value		
DIGITAL READOUT (ALL ELEMENTS O	OPERATIONAL)					
✓ TEMPERATURE OF ALCO SENSOR (1	0°C - 40°C)		1143			
PRINTER WORKING PROPERLY						
☑ TIME AND DATE DISPLAYING PROPE	RLY					
BREATH ALCOHOL ACCURACY STANDA	RDS					
SIMULATOR SOLUTION		COMPRESSED ETHANOL-GAS MIXTURE				
STANDARD SUPPLIER Guth Labs		OT# 23390	EXP. DATE 1	0/17/2025		
SIMULATOR TEMPERATURE (34°C ± 0	0.2°C) <u>34.02</u> SII	и. sn <u>МР387</u>	9 SIM. NIS	T EXP DATE 04/22/2025		
U 0.080% STANDARD - MUST READ 0.040% STANDARD - MUST READ	BETWEEN 0.038% and		Ē			
TEST 1 .104	TEST 2 .103		TEST 3 🖛 .103			
NDICATE THE NUMBER OF BREATH TES DO NOT INCLUDE SELF-ADMINISTERED		G RANGES SINCE	THE LAST MAINT	ENANCE REPORT:		
REFUSALS $0 \mid (004) \mid 0$	1	(.1014) 0	(15-19) 0	(OVER 19) 0		
List any new parts and describe any alterations and in the stablished limits (use other side if necessary).	on or modification that v	(1.10 11 1)	(.10 .10)	(0 1211.10)		
NSPECTING OFFICER BIGNATURE STATE C. WOOLS TYPE II PERMIT NUMBER/EXPIRATION DATE			PRINT NAME Brian C. Woods TELEPHONE NUMBER	S		
240133 6/6/2026			(660) 542-2200			
Return completed report to the: Breath A by mail,	lcohol Program, MO De _l fax, or email.	partment of Health ar	nd Senior Services	, Southeast District Office		
	•					

AS IV Serial no: 099361 Version no: 5328 TEST RECORD 01123 Temp Date Time 210L Air Blank: 08/03/24 05:26 .000 Calibration Check: 22 08/03/24 05:26 .104 Subject Name	AS IV Serial no: 099361 Version no: 532B TEST RECORD 01124 Temp Date Time 210L Air Blank: 08/03/24 05:27 .000 Calibration Check: 22 08/03/24 05:27 .103 Subject Name Test #2	AS IV Serial no: 099361 Version no: 532B TEST RECORD 01125 Temp Date Time 210L Air Blank: 08/03/24 05:29 .000 Calibration Check: 23 08/03/24 05:29 .103 Subject Name
Operator Name, I.D. R.C. Words 782 Location	B.C.C. wods, 782	Operator Name, I.D. Location

AS IV Serial no: 099361 Version no: 532B	AS IV Serial no: 099361 Version no: 532B	
TEST RECORD 01126	TEST RECORD 01127	
Temp Date Time 210L	Temp Date Time 210L	
VOID: RFI 12 08/03/24 05:31	Alr Blank: 08/03/24 05:32 .000 Subject Test: Auto 25 08/03/24 05:32 .000	
Subject Name	25 08/03/24 05:32 ,000	
Subject I.D.	Subject Name Black Tests Subject 1.D.	
Operator Name, I.D.	Subject 1.b.	
BC Woods, 782	Operator Name, L.D.	
	5.2. Woods, 782	



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.



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



PERMIT TYPE!!

BRIAN C. WOODS

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

tor 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 6/6/2024

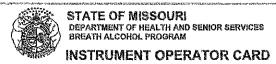
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

EXPIRES 6/6/2026

ORECTOR OF DEPARTMENT OF HEALTH AND SERVICES



LAD-4 (R6-10)



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 Mescuri.

Operator WOODS, BRIAN Permit No 240133

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

