

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

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

REPORT #7

We construct the second				
Complete this report in duplicate at the time of Send copy to Department of Health and Senic				enever instrument is repaired
ALCO SENSOR IV SN 099361	NAME OF AGENCY Carroll County S	heriff's Office		of Inspection 05/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 106 S. Folger St, Carrollton			TIME	of inspection 9 pm
CHECKLIST: Place a mark in the box by each where determined.) Unmarked items must be				
☑ DIGITAL READOUT (ALL ELEMENTS OF	PERATIONAL)			
☑ TEMPERATURE OF ALCO SENSOR (10	°C - 40°C)			
PRINTER WORKING PROPERLY				
☑ TIME AND DATE DISPLAYING PROPER	LY			
BREATH ALCOHOL ACCURACY STANDAR	DS			
SIMULATOR SOLUTION		☐ COMPRESSE	D ETHANOL-GAS N	/IXTURE
STANDARD SUPPLIER Guth Labs	L	OT # <u>24110</u>	EXP. DATE <u>03</u> /	05/2026
SIMULATOR TEMPERATURE (34°C ± 0,	2°C) <u>34.02</u> SII	и. sn <u>МР387</u>	9 SIM. NIST	EXP DATE <u>04/22/2025</u>
U 0.080% STANDARD - MUST READ I 0.040% STANDARD - MUST READ I TEST 1 ■ .102		0.042% INCLUSIVE		
	.102		.102	
RFI DETECTOR OPERATING				
INDICATE THE NUMBER OF BREATH TEST (DO NOT INCLUDE SELF-ADMINISTERED 1		G RANGES SINCE 1	THE LAST MAINTE	NANCE REPORT:
REFUSALS 0 (004) 0	(.0509) 1	(.1014) 0	(.1519) 0	(OVER .19) 0
List any new parts and describe any alteration established limits (use other side if necessary)		vas made to restore	the instrument to op	erate satisfactorily and within
INSPECTING OFFICER				
SIGNAPURE			PRINT NAME Brian C. Woods	
TYPE II PERMIT NUMBER/EXPIRATION DATE			TELEPHONE NUMBER	
240133 6/6/2026			(660) 542-2200	
Return completed report to the: Breath Ald	ohol Program, MO Der x, or email.	Dartment of Health ar		Southeast District Office

Version no: 532B	
TEST RECORD 01143	
Temp Date Time 210L ,	
Air Blank:	
10/05/24 14:19 .000 Callbratlon Check:	
24 10/05/24 14:19 .102	(
Subject Name	Ş
Test #1	3
Subject I.D.	5
Operator Name, I.D.	5
Location Location	
Location	

099387 5328 RD 01143	AS IV Serial no: 099361 Version no: 532B TEST RECORD 01144	AS IV Ser Version no
Time 210L ,	Temp Date Time 210L	TEST RE
14:19 .000 heck: 14:19 .102	Air Blank: 10/05/24 14:21 .000 Calibration Check: 25 10/05/24 14:21 .102	Temp Dat Air Blank: 10/05/ Calibratio
	Subject Name  /es + 2 Subject I.D.	25 10/05/ Subject Na
5,782	Decrator Name   1.D.  BCCOODS, 782  Location	Operator N
		$\varphi$

	AS IV Serial no: 099361 Version no: 532B
	TEST RECORD 01145
	Temp Date Time 210L
!	Air Blank: 10/05/24 14:24 .000 Calibration Check: 25 10/05/24 14:24 .102
	Subject Name #3 Subject 1.D.
	Decrator Name, I.D.  B.C. Woods, 782  Location

AS IV Serial no: 099381 Version no: 532B	
TEST RECORD 01146	
Temp Date Time 210L	
VOID: RFI 12 10/05/24 14:26	
Subject Name  RFI Test Subject 1.D.	
Operator Name, I.D.  BC Woods, 782  Location	

AS IV Serial no: 099361 Version no: 532B TEST RECORD 01147
g/ Temp Date Time 210L
Air Blank: 10/05/24 14:28 .000 Subject Test: Auto 26 10/05/24 14:28 .000
Subject Name  Blank Test Subject I.D.
Operator Name, 1.D. B.C. Woods, 782 Location



#### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 24110 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 6, 2024, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1215% (w/vol) ethyl alcohol. The expiration date for this lot number is March 5, 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. 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

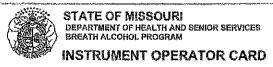
## **BRIAN C. WOODS**

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



LAB 4 (FIG-10)



The named cardholder is authorized to operate an avidential breath alcohol Instrument for the determination of the alcoholic content in breath form of expired all In Missouri.

Operator WOODS, BRIAN

Permit No 240133

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

