

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED
By Tracy Crews at 3.27 pm, Maj

REPORT #7

Complete this report in duplicate at the time Send copy to Department of Health and Ser					d whenev	ver instrument is	repaired.	
alco sensor iv sn 102466	SN NAME OF AGENCY Sullivan Police Department					DATE OF INSPECTION 05/03/2024		
LOCATION OF INSTRUMENT (STREET AND CITY) 106 Progress Drive Sullivan, MO 63080					TIME OF INSPECTION 1:05 am			
CHECKLIST: Place a mark in the box by eac where determined.) Unmarked items must b			perating	within establish	ed limits.	. (Write in observ	/ed values	
DIGITAL READOUT (ALL ELEMENTS (OPERATIONAL)							
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)								
PRINTER WORKING PROPERLY								
☑ TIME AND DATE DISPLAYING PROPERLY								
BREATH ALCOHOL ACCURACY STANDA	RDS							
SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE								
✓ STANDARD SUPPLIER Guth Labs	STANDARD SUPPLIER Guth Labs LOT # 23390 EXP. DATE 10/17/2025							
SIMULATOR TEMPERATURE (34°C ± 0	0.2°C) <u>34.0</u>	SIM. SN	SD 332	22 SIM. N	IIST EXF	DATE 01/23/2	2025	
 ✓ CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) ✓ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE ✓ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE ✓ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE TEST 1 ★ .100 								
☑ 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)	(.1014)	0	(.1519)	0	(OVER .19)	2	
List any new parts and describe any alterati established limits (use other side if necessar Instrument operating within Department	y).		restore	the instrument t	o operat	e satisfactorily a	and within	
INSPECTING OFFICER	14 15 15 15 15 15 15 15 15 15 15 15 15 15		1000	DDINT NAME	200		THE PLAN	
SIGNATURE MANNE M. Stock tox				Jason R. Stockton				
type II permit number/expiration dafé 230096 / 05-23-25				(573) 468-8001				
	lcohol Program, MO [fax, or email.	Department of H	ealth ai	nd Senior Servic	es, Sout	heast District Of	ffice	

AS IV Serial no: 102466
Version no: 532B

TEST RECORD 01497

Temp Date Time 210L
Air Blank:
05/03/24 01:05 .000
Calibration Check:
20 05/03/24 01:05 .100

Subject Name

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 102466 Version no: 532B

TEST RECORD 01498

Temp Date Time 210L Air Blank: 05/03/24 01:07 .000 Calibration Check: 21 05/03/24 01:07 .100

Subject Name

Subject I.D.

Operator Name, I.D.

Location

TEST RECORD 01499

Temp Date Time 210L

Air Blank: 05/03/24 01:09 .000

Calibration Check: 21 05/03/24 01:09 .100

Subject Name

AS IV Serial no: 102466

Version no: 532R

- - - 1 1631.162

Subject I.D.

Operator Name, I.D.

Location

AS IV Serial no: 102466 Version no: 532B

TEST RECORD 01500

Temp Date Time 210L

VOID: RFI 12 05/03/24 01:10

Subject Name

Subject I.D.

Operator Name, I.D.

Location



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 II

JASON R. STOCKTON

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.

DATE5/23/2023	Mike Masson				
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY				
NUMBER 230096					
EXPIRES 5/23/2025	Davida J. McChelson				
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES				

MO 580-0771 (6-10)

LAB-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 aid in Missouri.

Operator

STOCKTON, JASON

Permit No 230096 Date Issued 5/23/2023

3 Date Expires 5/23/2025

