

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

# RECEIVED By Tracy Crews at 9:12 am, Jun 10, 2024

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

There is a second										
Complete this report in duplicate at the Send copy to Department of Health and					nce check, an	d whenev	er instrument is	repaired.		
ALCO SENSOR IV SN 102469	PRINTER SN 095.353.1	PRINTER SN 095.353.193				DATE OF INSPECTION 06/07/2024				
LOCATION OF INSTRUMENT (STREET AND CIT Lafayette County Sheriff 107 S. 11	067	TIME OF INSPECTION 10:06 am								
CHECKLIST: Place a mark in the box bues where determined.) Unmarked item					g within establ	ished limi	ts. (Write in obse	erved val-		
DIGITAL READOUT (ALL ELEMEN		ororo domg	mouranier							
TEMPERATURE OF ALCO SENSOR (10°C - 40°C)										
✓ PRINTER WORKING PROPERLY										
✓ TIME AND DATE DISPLAYING PROPERLY										
BREATH ALCOHOL ACCURACY STA										
☑ SIMULATOR SOLUTION				COMPRESSED ETHANOL-GAS MIXTURE						
STANDARD SUPPLIER Guth Lab	LOT i	<sub>#</sub> 22430		EXP. DATE 11/25/2024						
SIMULATOR TEMPERATURE (34)	SIMULATOR TEMPERATURE (34°C ± 0.2°C)34.0 SIMULATOR SNN					P6530 SIMULATOR EXP DATE 01/02/2025				
Run three tests using a standard so less. Check the box corresponding  0.100% STANDARD - MUST I  0.080% STANDARD - MUST I  0.040% STANDARD - MUST I	to the standard solutio READ BETWEEN 0.09 READ BETWEEN 0.07	n being use 95% and 0.1 '6% and 0.0	ed. (PRINT 105% INCL 084% INCL	OUT AT LUSIVE LUSIVE		and must	have a spread c	of .005 or		
TEST 1 ☞ .098	TEST 2095	TEST 2   .095				TEST 3 <b>■</b> .095				
RFI DETECTOR OPERATING										
INDICATE THE NUMBER OF BREATH (DO NOT INCLUDE SELF-ADMINISTE		LOWING R	ANGES S	INCE T	HE LAST MA	INTENAN	ICE REPORT:			
REFUSALS 0 (004)	0 (.0509)	0 (.10	014)	0	(.1519)	0	(OVER .19)	0		
List any new parts and describe any a established limits (use other side if nec Meets DOH Standards		n that was	made to re	estore t	he instrument	to operat	e satisfactorily a	nd within		
INSPECTING OFFICER SIGNATURE				F	PRINT NAME					
· Od Lax	7				Dale L. Cox					
TYPE II PERMIT NUMBER/EXPIRATION DATE 240091 04/12/2026					TELEPHONE NUMBER (660) 259-3622					
	ath Alcohol Program, I 5 James Boulevard	MO Departr	nent of He	ealth and	d Senior Servi	ces, Sout	heast District Off	ice		

Services not serviced as 182469  Services not not serviced as 182469  Services not not serviced as 182469  Carolina Period not serviced as 182469  Carolina Period not serviced as 182469  Carolina Period not serviced as 1824699  Carolina Period not serviced as 18246999  Carolina Period not serviced not serviced as 18246999  Carolina Period not serviced not	
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#### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 22430 of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on December 1, 2022, using a Perkin Elmer Gas
Chromatograph Autosystem XL S/N: 610N9030209, and found to contain
0.1216% (w/vol) ethyl alcohol. The expiration date for this lot
number is November 30, 2024 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 FN03052002 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 DALE L. COX

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, INTOX DMT

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. DATE 4/12/2024 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 240091 Daves J. Michelson EXPIRES 4/12/2026 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO-580-0771-(8-10)

LAB-4 (R6-10)



#### 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 alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator COX, DALE Permit No

240091

Date Expires 4/12/2026

