



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

REPORT #7

Complete this report in duplicate at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 107984	NAME OF AGENCY MSHP	DATE OF INSPECTION 11/06/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 1702 E. Laharpe Street, Kirksville, MO 63501		TIME OF INSPECTION 3:09 pm

**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 STANDARDS**

SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER Guth Laboratories, Inc. LOT # 23390 EXP. DATE 10/17/2025

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN MP2519 SIM. NIST EXP DATE 04/25/2025

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

TEST 2 ← .100

TEST 3 ← .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	(0-.04)	0	(.05-.09)	2	(.10-.14)	2	(.15-.19)	1	(OVER .19)	0
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

Time changed to reflect Standard time

**INSPECTING OFFICER**

SIGNATURE  
*Cathy Snyder #491*

PRINT NAME  
Tpr. C. J. Snyder, #491

TYPE II PERMIT NUMBER/EXPIRATION DATE  
240208 09/10/2026

TELEPHONE NUMBER  
(660) 385-2132

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.

AS IV Serial no: 107984  
Version no: 532B

TEST RECORD 00868 a/

Temp Date Time 210L

VOID: RFI  
12 11/06/24 15:15

Subject Name

RFI  
Subject I.D.

Operator Name, I.D.

Sp. C.J. Snyder #240208  
Location

1702 E. Lebarge St

Kirksville, MO

City Snyder #491

AS IV Serial no: 107984  
Version no: 532B

TEST RECORD 00867 a/

Temp Date Time 210L

Air Blank:  
11/06/24 15:13 .000  
Calibration Check:  
25 11/06/24 15:13 .100

Subject Name

Test # 3  
Subject I.D.

Operator Name, I.D.

Sp. C.J. Snyder #240208  
Location

1702 E. Lebarge St

Kirksville, MO

City Snyder #491

AS IV Serial no: 107984  
Version no: 532B

TEST RECORD 00866 a/

Temp Date Time 210L

Air Blank:  
11/06/24 15:11 .000  
Calibration Check:  
24 11/06/24 15:11 .100

Subject Name

Test # 2  
Subject I.D.

Operator Name, I.D.

Sp. C.J. Snyder #240208  
Location

1702 E. Lebarge St

Kirksville, MO

City Snyder #491

AS IV Serial no: 107984  
Version no: 532B

TEST RECORD 00865 a/

Temp Date Time 210L

Air Blank:  
11/06/24 15:09 .000  
Calibration Check:  
23 11/06/24 15:09 .100

Subject Name

Test # 1  
Subject I.D.

Operator Name, I.D.

Sp. C.J. Snyder #240208  
Location

1702 E. Lebarge St

Kirksville, MO

City Snyder #491



**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

## 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 XI, 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 P.M.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm 0.2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L  $\pm$  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 Certified Reference Standard lot number EN03072301 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.*



**Missouri Department of Health and Senior Services**  
 P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010  
 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466

Paula Nickelson  
 Acting Director

Michael L. Parson  
 Governor

# SIMULATOR CERTIFICATION REPORT

## SIMULATOR INFORMATION

Simulator Serial Number: MP2519      Manufacturer: Guth  
 Model Number: 12V500  
 Agency: MSHP (GHQ)  
 Agency Address: 1510 E. ELM ST, JEFFERSON CITY, MO 65101

## NIST THERMOMETER INFORMATION

Serial Number: 307715      Bias: 0.00  
 Uncertainty: 0.02  
 Date of Certification: 10/4/2023      Date of Expiration: 10/4/2024

## ENVIRONMENTAL CONDITIONS

The environmental conditions during testing are within the tolerances of DHSS BAP method 3.

## VERIFICATION RESULTS

<u>Simulator Average</u>	<u>NIST Average</u>	<u>Combined Uncertainty</u>
33.99	34.02	.06

The combined uncertainty is calculated with a k = 2 value.

## ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing: 4/25/2024  
 Certification Expiration: 4/25/2025  
 Simulator testing technician: J. CLEVELAND

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: BRIANNA MEDRANO  
 Certification No: MP2519 4252024

X *Brianna Medrano*

DHSS BAP Scientist Approving

Simulator Calibration Certification  
 Issued by Lab Manager, DHSS BAP  
 Revision Date: 06/25/2022

Breath Alcohol Program  
 1903 Northwood Drive, Suite 4  
 Poplar Bluff, MO 63901

DHSS BAP Document 3.6A  
 Revision 2  
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STATE OF MISSOURI  
 DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BREATH ALCOHOL PROGRAM



**PERMIT**  
**TYPE II**  
**CODY SNYDER**

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 9/10/2024

NUMBER 240208

EXPIRES 9/10/2026

*Adam H. White*

DIRECTOR, STATE PUBLIC HEALTH LABORATORY

*David J. Nicholson*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 587.0721 (5-12)

LAB 4 (R5 12)

**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 **SNYDER, CODY**  
 Permit No **240208**  
 Date Issued **9/10/2024** Date Expires **9/10/2026**

