



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

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

REPORT #7

<b>小部間が</b>				
Complete this report in duplicate at the time Send copy to Department of Health and Sen				ever instrument is repaired.
ALCO SENSOR IV SN 108271	NAME OF AGENCY Missouri State Highway Patrol			OF INSPECTION 3/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 3131 E Kearney, Springfield, Missouri 65803				F INSPECTION
CHECKLIST: Place a mark in the box by each		ctory or if operating	10.700	
where determined.) Unmarked items must be				
✓ DIGITAL READOUT (ALL ELEMENTS C	PERATIONAL)			
▼ TEMPERATURE OF ALCO SENSOR (1	0°C - 40°C)	A. D. C.		
✓ PRINTER WORKING PROPERLY				4444
✓ TIME AND DATE DISPLAYING PROPE			· · · · · · · · · · · · · · · · · · ·	
BREATH ALCOHOL ACCURACY STANDA	RDS			
✓ SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE				
✓ STANDARD SUPPLIER Guth Labora	atories, INC LC	<sub>OT #</sub> 23390	EXP. DATE 10/1	7/2025
SIMULATOR TEMPERATURE (34°C ± 0	0.2°C) 33.99 SIM	. SN MP2418	SIM. NIST E	XP DATE 12/05/2024
0.100% STANDARD - MUST READ     0.080% STANDARD - MUST READ     0.040% STANDARD - MUST READ	BETWEEN 0.076% and	0.084% INCLUSIVE	E	
TEST 1 <b>☞</b> .100	TEST 2 <b>-</b> .097		TEST 3 <b>▼</b> .097	
✓RFI DETECTOR OPERATING				
INDICATE THE NUMBER OF BREATH TES (DO NOT INCLUDE SELF-ADMINISTERED		RANGES SINCE	THE LAST MAINTEN	ANCE REPORT:
	(05.00)	(10.14)	(.1519)	(OVER .19)
REFUSALS (004)		(.1014)		
List any new parts and describe any alterati established limits (use other side if necessar		as made to restore	The institution to ope	
CHANG	ED TI	ME+	1 MII	NUTE
				s ()
INSPECTING OFFICER SIGNATURE			PRINT NAME	
+727			DWH	enley #727
TYPE II PERMIT NUMBER/EXPRATION DATE 22019	8/3/2024		TELEPHONE NUMBER ( 417 ) 895 - 686	8
	Alcohol Program, MO Dep	eartment of Health a	and Senior Services, S	outheast District Office
<b>27</b> 1.1.d,	- 100 AND 100			

AS IV Serial no: 108271 Version no: 532B TEST RECORD 00767

Air Blank: 05/03/24 18:23 .000 Calibration Check: 22 05/03/24 18:23 .100 Temp Date Time 210L

Subject Name

Subject I.D.

Operator Name, I.D. LECENTAL M

Location

3131 E KEARNEY

SORTHOFIELD, MO 10# 40

AS IV Serial no: 108271 Version no: 532B

TEST RECORD 00768

Temp Date Time 210I

Air Blank: 05/03/24 18:25 . Calibration Check: 22 05/03/24 18:25 .

Subject Name

Subject I.D. TEST 2

Operator Name, I.D.

313) E KEAQNEY Location W HENLEY # 727

SpeINGFIELD MO 10 A #727

> AS IV Serial no: 108271 Version no: 532B TEST RECORD 00769

Date Time 210L

Air Blank: 05/03/24 18:27 .000 Calibration Check: 23 05/03/24 18:27 .097

Subject Name

TEST 3 Subject I.D.

D WHENDEY #727 Operator Name, I.D.

Location 313) E KEARNEY

Spetwofteld mo 10 A # 727

AS IV Serial no: 108271 Version no: 532B

UOID: RFI 12 05/03/24 18:28 Temp Date Time 210L TEST RECORD 00770

Subject Name Subject I.D.

Operator Name, I.D. Location W HENNEY #727

Spatwefteld, mo 3131 E KEADNEY

101#X



### 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



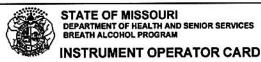
# PERMIT TYPE II

## DAVID W. HENLEY, JR.

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. Mile Massur DATE \_\_\_\_8/3/2022\_ DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 220190 Daves J. nichelson EXPIRES 8/3/2024 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES LAB-4 (R6-10) MO 580-0771 (6-10)



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

Operator HENLEY, JR., DAVID

Permit No 220190

Date Expires 8/3/2024

