

By Tracy Crews at 7:22 am, Sep 26, 2024



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

## ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

duct xx					
Complete this report in do		•			ever instrument is repaired.
ALCO SENSOR IV SN 111319		NAME OF AGENC	Police Dept	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	F INSPECTION
LOCATION OF INSTRUMENT (S 116 West Green St	TREET AND CITY) reet , Piedmont			TIME OF 1405	- INSPECTION
CHECKLIST: Place a man where determined.) Unma				g within established limit	s. (Write in observed values
DIGITAL READOUT			doing motiumont.		
TEMPERATURE OF					
PRINTER WORKING					
TIME AND DATE DIS		DLV			
BREATH ALCOHOL ACC					
		ND3			
SIMULATOR SOLUT		LANGE COLUMN SERVICE S	COMPRESSE	ED ETHANOL-GAS MIX	
STANDARD SUPPLI	ER Guth Labor	atories	LOT # 24110	EXP. DATE	5/2026
SIMULATOR TEMPE	ERATURE (34°C ± 0	<sub>0.2°C)</sub> 34.0c	_ SIM. SN SD 2257	SIM. NIST EX	KP DATE 01/29/2025
0.100% STANDA 0.080% STANDA	ARD - MUST READ ARD - MUST READ	BETWEEN 0.095 BETWEEN 0.076	being used. (PRINTOUT. % and 0.105% INCLUSIV % and 0.084% INCLUSIV % and 0.042% INCLUSIV	E E	
TEST 1 • .100		TEST 2 <b>▼</b> .099		TEST 3 <b>▼</b> .099	
✓RFI DETECTOR OPE	ERATING				
INDICATE THE NUMBER			OWING RANGES SINCE	THE LAST MAINTENA	NCE REPORT:
REFUSALS 0	(004)	(.0509)	(.1014)	(.1519)	(OVER .19)
List any new parts and d established limits (use off	escribe any alterati		that was made to restore	the instrument to oper	ate satisfactorily and within
INSPECTING OFFICER SIGNATURE	IL # 220	272 / 32	84	PRINT NAME	npbell
TYPE II PERMIT NUMBER/EXPIRATI				TELEPHONE NUMBER (S73) 223-47	300
Return completed repor		lcohol Program, M fax, or email.	O Department of Health a		utheast District Office

AS IV Serial no: 111319 Version no: 532B TEST RECORD 00525 Temp Date Air Blank: 09/24/24 14:10 .000 Subject Test: Man 20 09/24/24 14:10 .100 Subject Name Tesi Subject I.D. One Operator Name, I.D. amphell 220272 Locat ion 116 co Green

Predmont Mo 69957

AS IV Serial no: 111319
Version no: 532B

TEST RECORD 00526

9/
Temp Date Time 210L

Air Blank:
09/24/24 14:12 .000
Subject Test: Man
21 09/24/24 14:12 .099

Subject Name

Subject Test: Man
21 09/24/24 14:12 .000
Subject Test: Man
21 09/24/24 14:12 .099
Subject Name
TEST
Subject I.D.
TWO
Operator Name, I.D.
Campbell 200202
Location
We Green

Predment Mo 63957

AS IV Serial no: 111319 Version no: 532B

TEST RECORD 00527
9/
Temp Date Time 210L
Air Blank:
09/24/24 14:14 .000
Subject Test: Man

22 09/24/24 14:14 .099

Subject Name

7657 Subject I.D.

Three
Operator Name, I.D.

Campbell 220272

Location

116 W-Girgen

Predmont Mo 63957

TEST RECORD TEST RECORD TEST RECORD TEST RECORD Sect Name Exact Name Cation Cation Cation Cation	Me w. Green Proposition of May (395)	Per at or occar ion	bect 1.1.		III: RTI	emp Date Time 21	EST RECORD 00528	2	
		1503-		(3)	5	( <u>1</u> )		23	



### 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** 



# SHAUN CAMPBELL

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 same	ole of expired air. Permit issued under the provisions of sections
577.020 through 577.041, RSMo and 306.111 through 306.119 F	RSMo.
	Mile Mason
DATE12/21/2022	1.1 mes 1. mospores
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 220272	
	Davla J. Nichelson
EXPIRES 12/21/2024	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
MO 580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF REALTH AND SERVICES