



**RECEIVED**

By Tracy Crews at 1:15 pm, Jan 02, 2025

**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 111332	NAME OF AGENCY SENECA POLICE DEPARTMENT	DATE OF INSPECTION 12/31/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 517 ONEIDA ST. SENECA MO 64865		TIME OF INSPECTION 7:51 am

**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 LOT # 23390 EXP. DATE 10/17/2025

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN MP 2851 SIM. NIST EXP DATE 08/01/2025

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 .102

TEST 2 .102

TEST 3 .101

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)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	1
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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).

**INSPECTING OFFICER**

SIGNATURE 	PRINT NAME WILLIAM HOUSLEY II
TYPE II PERMIT NUMBER/EXPIRATION DATE 230168 08/07/2025	TELEPHONE NUMBER (417) 776-2723

**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: 111307  
Version no: 532B

TEST RECORD 81278

Time Date Time 2191

Air Blank:  
12/31/24 07:52 .009  
Calibration Check:  
12/31/24 07:52 .100

Subject Name

Test

Subject I.D.

Test 1

Operator Name: I.D.

W. Howley 230168

Location:

517 Onaida St.

Seneca Mo 64865

AS IV Serial no: 111302  
Version no: 532B

TEST RECORD 81272

Time Date Time 2191

Air Blank:  
12/31/24 07:53 .009  
Calibration Check:  
12/31/24 07:53 .100

Subject Name

Test

Subject I.D.

Test 2

Operator Name: I.D.

W. Howley 230168

Location:

Seneca Mo 64865

AS IV Serial no: 111302  
Version no: 532B

TEST RECORD 81272

Time Date Time 2191

Air Blank:  
12/31/24 07:53 .009  
Calibration Check:  
12/31/24 07:53 .100

Subject Name

Test

Subject I.D.

Test 3

Operator Name: I.D.

W. Howley 230168

Location:

517 Onaida St.

Seneca Mo 64865

AS IV Serial no: 111302  
Version no: 532B

TEST RECORD 81277

Time Date Time 2191

00104 RFI  
12/31/24 07:50

Subject Name

Test

Subject I.D.

RFI Test

Operator Name: I.D.

W. Howley 230168

Location:

517 Onaida St.

Seneca Mo 64865



# 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 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  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , 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 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

2

**PERMIT  
 TYPE II**

**WILLIAM J. HOUSLEY II**

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.

DATE 8/7/2023

NUMBER 230168

EXPIRES 8/7/2025

*Mike Mason*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Paula J. Nielsen*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

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** HOUSLEY II, WILLIAM  
**Permit No** 230168  
**Date Issued** 8/7/2023 **Date Expires** 8/7/2025

