

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

RECEIVED By Tracy Crews at 8:02 am, Dec 02, 2024

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

MOSTER .									
Complete this report in duplicate at Send copy to Department of Health							d whenev	ver instrument is	repaired.
ALCO SENSOR IV SN 111333	NAME OF AGENCY Missouri State Highway Patrol				DATE OF INSPECTION 11/29/2024				
LOCATION OF INSTRUMENT (STREET AND CITY) 2201 I-70 Drive Northwest Columbia, Missouri 65202						TIME OF INSPECTION 11:15 am			
CHECKLIST: Place a mark in the bo					perating	within establis	hed limits.	. (Write in observ	ed values
where determined.) Unmarked item	s must be	e corrected bef	ore using	instrument.					
☑ DIGITAL READOUT (ALL ELE	MENTS (PERATIONAL	.)						
☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)									
✓ PRINTER WORKING PROPERLY									
☑ TIME AND DATE DISPLAYING	PROPE	RLY							
BREATH ALCOHOL ACCURACY	STANDA	RDS							
☑ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE									
Z STANDARD SUPPLIER Guth LOT # 23390 EXP. DATE 10/17/2025									
SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.01 SIM. SN MP2427 SIM. NIST EXP DATE 04/03/2025								2025	
CALIBRATION CHECK – (ONL Run three tests using a standar less. Check the box correspond 0.100% STANDARD - MU 0.080% STANDARD - MU 0.040% STANDARD - MU	d solution ing to the ST READ ST READ	n. All three test standard solu BETWEEN 0. BETWEEN 0.	ts must b tion being 095% an 076% an	e within ±5% g used. (PRII d 0.105% IN d 0.084% IN	of the s NTOUT A CLUSIVE CLUSIVE	tandard value TTACHED)	1007.00	t have a spread	of .005 or
TEST 1 0.104		TEST 2 0.104				TEST 3 0.102			
✓ RFI DETECTOR OPERATING			S.						
INDICATE THE NUMBER OF BRE (DO NOT INCLUDE SELF-ADMINI			LLOWIN	IG RANGES	SINCE	THE LAST MA	INTENAN	NCE REPORT:	•
REFUSALS 0 (004)	0	(.0509)	1	(.1014)	0	(.1519)	0	(OVER .19)	0
List any new parts and describe ar established limits (use other side if Tested within DHSS Standards	76		tion that v	was made to	restore	the instrument	to operat	te satisfactorily a	and within
INSPECTING OFFICER									
SIGNATURE					PRINT NAME Trooper D. L. Holliday				
TYPE II PERMIT NUMBER EXPIRATION DATE 240204/ 09-06-2026	× ×				TELEPHONE NUMBER (573) 751-1000				
Return completed report to the:		lcohol Program	n, MO De	partment of	Health ar			theast District Of	fice

AS IV Serial no: 111333 Version no: 532B

TEST RECORD 01154

Temp Date Time 210L

Air Blank: 11/29/24 11:23 .000 Calibration Check:

19 11/29/24 11:23 .104

Subject Name

ACC 1

Subject I.D.

HCC 1

Operator Name, I.D.

2201 I-70 D, NU

Colombia Mo

AS IV Serial no: 111333 Version no: 532B

TEST RECORD 01156

Temp Date Time 210L

Air Blank: 11/29/24 11:26 .000

Calibration Check: 21 11/29/24 11:26 .102

Subject Name

Subject I.D.

Operator Name, I.D.

Holledon 240204

Location

2201 I-70 DINW

Columbia, Mo

AS IV Serial no: 111333 Version no: 532B

TEST RECORD 01155

Temp Date Time 210L

Air Blank: 11/29/24 11:25 .000 Calibration Check: 19 11/29/24 11:25 .104

Subject Name

Subject I.D.

Operator Name, I.D.

Hollodon 240204

Location

2201 I-70 Dr NU

Colombia, Mo

AS IV Serial no: 111333 Version no: 532B

TEST RECORD 01157

Temp Date Time 210L

UOID: RFI 12 11/29/24 11:28

Subject Name

RFI Test

Subject I.D.

RFI Test

Operator Name, I.D.

Hollidan 240204 Location

2201 I-70 D- NU

Colombin mo



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 L. HOLLIDAY

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

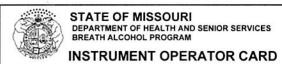
ALCO-SENSOR IV WITH PRINTER, INTOX DMT

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.

DATE9/6/2024	adam Huli					
DAIL ZIMEVEL	DIRECTOR S. STATE PUBLIC HEALTH LABORATORY					
NUMBER 240204						
EXPIRES 9/6/2026	Davla I. nichelson					
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES					
	140 4 00 4 10					

MO 580-0771 (6-10)

LAB-4 (R6-10)



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 in Missouri.

Operator HOLLIDAY, DAVID

Permit No 240204

Date Issued 9/6/2024 Date Expires 9/6/2026

