



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

A STATE OF THE STA						
Complete this report in do					rer instrument is repaired.	
ALCO SENSOR IV SN 111632		NAME OF AGENCY Missouri State	Highway Patrol	DATE OF 10/21/2	INSPECTION 024	
LOCATION OF INSTRUMENT (STREET AND CITY) Troop G Headquarters, Willow Springs			TIME OF I 7:43 PI	NSPECTION VI		
CHECKLIST: Place a mai	rk in the box by each	item if found to be satis-	factory or if operating	within established limits.	(Write in observed values	
where determined.) Unma						
✓ DIGITAL READOUT	(ALL ELEMENTS O	PERATIONAL)				
TEMPERATURE OF ALCO SENSOR (10°C - 40°C) 19°C						
PRINTER WORKING	PROPERLY	*				
TIME AND DATE DIS						
BREATH ALCOHOL ACC	CURACY STANDAR	RDS				
SIMULATOR SOLUT				D ETHANOL-GAS MIXT		
STANDARD SUPPLI	ER Guth Labora	tories Inc	OT # 23390	EXP. DATE 10/17/		
SIMULATOR TEMPE	ERATURE (34°C ± 0	.2°C) 34.00 SII	M. SN MP2473	SIM. NIST EXF	DATE 02/01/2025	
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 1100 TEST 2100				TEST 3 ▼ .099		
✓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	(004) 0	(.0509)	(.1014) 0	(.1519) 0	(OVER .19) 0	
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	Marian	
, The day			Thomas Meyer			
TYPE II PERMIT NUMBER/EXPIRAT	ON DATE 240173	08/16/2026	8	TELEPHONE NUMBER (417-469-3121		
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.						

TEST RECORD 00286 Temp Date Time 210L Air Blank: 10/21/24 19:46 .000 19 10/21/24 19:46 .100 Calibration Check: 19 10/21/24 19:48 .100 20 10/21/24 19:48 .100	Version no: 532B	AS IU Serial no: 111632 Version no: 532B	11632
	TEST RECORD: 00286	TEST RECORD 06	287
	Temp Date Time 210L	Temp Date Time	9/ 216I
	Air Blank: 10/21/24 19:46 .000 Calibration Check:	Air Blank: 16/21/24 19:48	. 999
	19 10/21/24 19:46 .188	Calibration Check: 20 10/21/24 19:48	.166

AS IV Serial no: 111632 Version no: 532B

e, I.D.	24017	Ha	SPRINGS
Operator Name,	I MEYER	Location Troop 0	Willow S

Operator Name, I.D.
I.MEYEL 2401
Location

W111000 SPRINGS

They 3 Ha

AS IU Serial no: 111632 Version no: 532B TEST RECORD GASOG	TemP Date Time 210L WOID: RFI 12 10/21/24 19:53	Subject Name	Operator Name, I.D.	T. MEYER OHO173	Twop 6 Ha	WILLOW SPRIMES
TEST RECORD 00288 9/ Temp Date Time 210L	Air Blank: 10/21/24 19:51 .000 Calibration Check: 21 10/21/24 19:51 .099	Subject Name Subject I.D.	e, I.D.	Location	Troop a Ha	Unillow Springs

Subject I.D.

Subject I.D.



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

THOMAS W. MEYER

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. MA 1 INA

DATE 8/16/2024	Mike Massin
DAIL WILLIAM I	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240173	
EXPIRES 8/16/2026	Davla I. Nichelson
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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

Operator MEYER THOMAS Permit No

240173

Date Expires 8/16/2026 Date Issued 8/16/2024

