



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 111636	NAME OF AGENCY MISSOURI STATE HIGHWAY PATROL	DATE OF INSPECTION 07/05/2024
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LOCATION OF INSTRUMENT (STREET AND CITY) ODESSA ZONE OFFICE, 7353 OUTER ROAD, ODESSA, MO 64076	TIME OF INSPECTION 5:30 pm
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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) 34.00 SIM. SN MP2327 SIM. NIST EXP DATE 11/27/2024

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 .103

TEST 2 .103

TEST 3 .102

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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(OVER .19)
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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).

TIME UPDATED +2 MINUTES

INSPECTING OFFICER

SIGNATURE
CDL M.J. Hanrahan

PRINT NAME
MATTHEW J. HANRAHAN

TYPE II PERMIT NUMBER/EXPIRATION DATE
230075, 04/14/2025

TELEPHONE NUMBER
(816) 622-0800

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: 111636
Version no: 532B

TEST RECORD 00751

Temp Date Time 210L
g/

Air Blank: 07/05/24 17:33 .000
Calibration Check: 22 07/05/24 17:33 .103

Subject Name

TEST # 1

Subject I.D.

Operator Name, I.D.

M.S. HANRAHAN #230075

Location

ODESSA ZONE OFFICE

7353 OUTR RD

ODESSA, MO 64076

AS IV Serial no: 111636
Version no: 532B

TEST RECORD 00752

Temp Date Time 210L
g/

Air Blank: 07/05/24 17:34 .000
Calibration Check: 23 07/05/24 17:34 .103

Subject Name

TEST # 2

Subject I.D.

Operator Name, I.D.

M.S. HANRAHAN #230075

Location

ODESSA ZONE OFFICE

7353 OUTR RD

ODESSA, MO 64076

AS IV Serial no: 111636
Version no: 532B

TEST RECORD 00753

Temp Date Time 210L
g/

Air Blank: 07/05/24 17:36 .000
Calibration Check: 24 07/05/24 17:36 .102

Subject Name

TEST # 3

Subject I.D.

Operator Name, I.D.

M.S. HANRAHAN #230075

Location

ODESSA ZONE OFFICE

7353 OUTR RD

ODESSA, MO 64076

AS IV Serial no: 111636
Version no: 532B

TEST RECORD 00754

Temp Date Time 210L
g/

VOID: RFI
12 07/05/24 17:37

Subject Name

RFI

Subject I.D.

Operator Name, I.D.

M.S. HANRAHAN #230075

Location

ODESSA ZONE OFFICE

7353 OUTR RD

ODESSA, MO 64076



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



PERMIT
TYPE II

MATTHEW HANRAHAN

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repair (and to repair 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 547.026 through 547.041, RSMo and 306.111 through 306.119 RSMo

ISSUE: 4/14/2023

PERMIT NO: 230075

EXPIRES: 4/14/2025

Matthew Hanrahan

DIRECTOR OF STATE BUREAU OF BREATH ALCOHOL PROGRAM

Paula J. Nicholson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

STATE OF MISSOURI
 DEPARTMENT OF HEALTH AND SENIOR SERVICES
 BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named operator is authorized to operate an essential breath alcohol instrument for the determination of the alcoholic content in breath from expired air in Missouri.

Operator: HANRAHAN, MATTHEW
 Permit No: 230075
 Date Issued: 4/14/2023 Date Expires: 4/14/2025

