

By Tracy Crews at 9:19 am, May 23, 2024

# MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

### ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in du Send copy to Department	plicate at the time of Health and Seni	of the regular monthly por Services; retain origin	reventative maintena nal in department file.	ince check, and wh	enever instrument is repaired.	
ALCO SENSOR IV SN		NAME OF AGENCY Missouri State Highway Patrol		UT (100)	E OF INSPECTION 114/2024	
LOCATION OF INSTRUMENT (S 102-B South Holden St	TREET AND CITY) Treet, Warrensburg			OF INSPECTION 35 am		
CHECKLIST: Place a mar	k in the box by each	item if found to be satis	factory or if operating	within established li	mits. (Write in observed values	
where determined.) Unma	arked items must be	corrected before using	instrument.			
✓ DIGITAL READOUT	(ALL ELEMENTS C	PERATIONAL)			f)	
✓ TEMPERATURE OF	ALCO SENSOR (1	0°C - 40°C)				
✓ PRINTER WORKING PROPERLY						
✓ TIME AND DATE DIS		CONTRACTOR OF STREET,				
BREATH ALCOHOL ACC	CURACY STANDAL	RDS				
SIMULATOR SOLUT	ION	5	COMPRESSE	D ETHANOL-GAS I		
✓ STANDARD SUPPLI	ER GUTH	L	OT # 23180	EXP. DATE 05/	/17/2025	
✓ SIMULATOR TEMPE	RATURE (34°C ± 0	0.2°C) 34.01 SI	M. SNMP250	6 SIM. NIST	EXP DATE 11/27/2024	
<ul><li>✓ 0.100% STANDA</li><li>☐ 0.080% STANDA</li></ul>	ARD - MUST READ ARD - MUST READ	e standard solution being DBETWEEN 0.095% an DBETWEEN 0.076% an DBETWEEN 0.038% an	d 0.105% INCLUSIVI d 0.084% INCLUSIVI	≣ ≣		
TEST 1 .102		TEST 2 .103		TEST 3 .102		
RFI DETECTOR OPE	ERATING		,			
INDICATE THE NUMBER			IG RANGES SINCE	THE LAST MAINTE	ENANCE REPORT:	
REFUSALS	(004)	(.0509)	(.1014)	(.1519)	(OVER .19)	
List any new parts and d	escribe any alterati	on or modification that	was made to restore	the instrument to o	perate satisfactorily and within	
established limits (use of						
INSPECTING OFFICER						
signature Lawrebo #580				Samuel Lee Edwards 、		
TYPE I PERMIT NUMBER/EXPIRATION DATE 220220 / 09-09-2024				TELEPHONE NUMBER (816) 622-0800		
Return completed repo		Alcohol Program, MO De fax, or email.	epartment of Health a	nd Senior Services	, Southeast District Office	

AS IV Serial no: 111734 Version no: 532B TEST RECORD 00258

9/ Temp Date Time 210L

Air Blank: 85/14/24 18:35 .888 Calibration Check:

Test #/

Sam Edwards 220220

102 B S. Holder

Warrensburg MD. 64093

AS IV Serial no: 111734 Version no: 532B

TEST RECORD 00259

Temp Date Time 210L

Air Blank:

05/14/24 10:38 .000

Calibration Check: 21 05/14/24 10:38 .103

Subject Name

Test #2

Operator Name, I.D.

Sam Edwards 220200 Location

102 B S. Holden St.

Warrensburg MD. 64093

AS IV Serial no: 111734 Version no: 532B

TEST RECORD 00260

Temp Date Time 210%

Air Blank: 85/14/24 18:48 .888

Salaration Check on 95/14/24 18:48 .182

White A Hame

Test # 3

on of our Moreon T D

Sam Edwards 220220

102 B S. Holden

Warrensburg MD. 64093

AS IU Serial no: 111734
Uersion no: 532B
TEST RECORD 88261
Subject Name
Test RFT
Subject Name
OPERATOR NAME
OF SUBJECT NAME
OF S



#### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 23180 of
Alcohol Reference Solution for Simulator were analyzed by
gas chromatography on May 18, 2023, using a Perkin Elmer Gas Chromatograph
Autosystem XL S/N: 610N9030209, and found to contain 0.1220% (w/vol)
ethyl alcohol. The expiration date for this lot
number is May 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 FN11172002 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

### **SAMUEL EDWARDS**

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.

DATE	9/9/2022	Laura & Nay			
	*	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY			
NUMBER	220220				
EXPIRES <b>9/9/2024</b>	9/9/2024	Thouand A. Kann w			
		DIRECTOR OF DEPARTMENT OF HEALTH AND SENI∲R 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 in Missouri.

Operator EDWARDS, SAMUEL

Permit No 220220

Date Issued 9/9/2022 Date Expires 9/9/2024

