

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

# RECEIVED By Tracy Crews at 8:49 am, Dec 12, 2024

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

waters,						
Complete this report in duplicate at the time of Send copy to Department of Health and Senior	f the regular monthly por r Services; retain origin	reventative maintena al in department file.	ance check, and	wheneve	er instrument is	repaired.
ALCO SENSOR IV SN 111736	NAME OF AGENCY Missouri State Highway Patrol			DATE OF INSPECTION 12/09/2024		
LOCATION OF INSTRUMENT (STREET AND CITY) 6012 NE Antioch Road, Gladstone, MO 64119			TIME OF INSPECTION 11:00 am			
CHECKLIST: Place a mark in the box by each in	tem if found to be satisfa	actory or if operating	within establish	ed limits.	(Write in observe	ed values
where determined.) Unmarked items must be of	corrected before using i	instrument.				
☑ DIGITAL READOUT (ALL ELEMENTS OF	PERATIONAL)					
☑ TEMPERATURE OF ALCO SENSOR (10	°C - 40°C)					
☑ PRINTER WORKING PROPERLY						
☑ TIME AND DATE DISPLAYING PROPERI	LY					
BREATH ALCOHOL ACCURACY STANDAR	DS					
✓ SIMULATOR SOLUTION		☐ COMPRESSE	D ETHANOL-G	AS MIXT	URE	
✓ STANDARD SUPPLIER Guth Laborator	ries Lo	OT # 23180	EXP. DATE	05/17/2	.025	
✓ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.00 SIM. SN MP2424 SIM. NIST					P DATE _11/27/2	2024
less. Check the box corresponding to the s  0.100% STANDARD - MUST READ  0.080% STANDARD - MUST READ  0.040% STANDARD - MUST READ	BETWEEN 0.095% and BETWEEN 0.076% and	1 0.105% INCLUSIV 1 0.084% INCLUSIV	E E			
TEST 1 • .101	TEST 2   .100		TEST 3  ₹ .099			
☑ RFI DETECTOR OPERATING						
INDICATE THE NUMBER OF BREATH TEST		G RANGES SINCE	THE LAST MA	INTENAN	ICE REPORT:	
(DO NOT INCLUDE SELF-ADMINISTERED				0		0
REFUSALS 0 (004) 0	(.0509)	(.1014) 0	(.1519)	0	(OVER .19)	
List any new parts and describe any alteration established limits (use other side if necessary Adjusted time +5 minutes Adjusted for Daylight Savings -1 hour	on or modification that v	vas made to restore	the instrument	to operat	te satisfactorily	and within
,,						
INSPECTING OFFICER			PRINT NAME		1,100,000	
SIGNATURE			CPL. B. E. THOMAN #1256			
TYPE II PERMIT NUMBER/EXPIRATION DATE 240111 05/21/2026			(816) 622-0800			
Return completed report to the: Breath Al	lcohol Program, MO De fax, or email.	partment of Health a	and Senior Serv	ices, Sou	theast District C	Office

AS IV Serial no: 111736 Version no: 532B

TEST RECORD 00257

Temp Date Time 210L

Air Blank:
12/09/24 11:01 .000
Calibration Check:

21 12/09/24 11:01 .101

Subject Name

MAINT TEST #1

Operator Name, I.D.

CAC DE THOMAN 240ml

Location

CLAY (O, Z.O.

AS IV Serial no: 111736 Version no: 532B

TEST RECORD 00258

Temp Date Time 210L

Air Blank: 12/09/24 11:03 .000 Calibration Check: 22 12/09/24 11:03 .100

Subject Name

MAINT TEST # Z Subject I.D.

Operator Name, I.D.

CRB-E. +HOMAN 24011)
Location

CLAY (0. 2.0.

AS IV Serial no: 111736 Version no: 532B

TEST RECORD 00259

Temp Date Time 210L Air Blank:

12/09/24 11:05 .000 Calibration Check: 23 12/09/24 11:05 .099

Subject Name

MAINT TEST #3
Subject I.D.

Operator Name, I.D.

CPC. S.E. TAOMAN 24011)

Location

CLAY 10. 2.0-

AS IV Serial no: 111736 Version no: 532B

TEST RECORD 00260

Temp Date Time 210L

VOID: RFI 12 12/09/24 11:06

Subject Name

RFITESI Subject I.D.

Operator Name, I.D.

CALBE-THONAN 24011

CLAY CO. 7.0 -



#### CERTIFICATE OF ANALYSIS

Certified Alcoho Reserence 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.

SIST Traceability:

Testing was conducted using Certifiant 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 pripr to each use utilizing NIST traceable weights.



#### STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



# PERMIT

### **BRUCE E. THOMAN**

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

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 THOMAN, BRUCE

Permit No 240111
Date Issued 5/21/2024 Date Expires 5/21/2026

