

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

RECEIVED By Tracy Crews at 8:35 am, Jun 10, 2024

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

, AND AND A					
Complete this report in duplicate at the time Send copy to Department of Health and Sen		*.		ever instrument is rep	aired.
ALCO SENSOR IV SN 111738	NAME OF AGENCY Missouri State H	lighway Patrol	DATE 01 06/08	F INSPECTION /2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 6012 NE Antioch Road, Gladstone, MO 64119			TIME OF 9:00 p	INSPECTION	
CHECKLIST: Place a mark in the box by each	n item if found to be satis	factory or if operating	within established limits	s. (Write in observed v	values
where determined.) Unmarked items must be	e corrected before using	instrument.			
☑ DIGITAL READOUT (ALL ELEMENTS (PERATIONAL)				
✓ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)					
☑ PRINTER WORKING PROPERLY					
☑ TIME AND DATE DISPLAYING PROPERLY					
BREATH ALCOHOL ACCURACY STANDA	RDS				
✓ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE					
☑ STANDARD SUPPLIER Guth Laborate	oriesL	OT # 23180	EXP. DATE 05/17/	2025	
SIMULATOR TEMPERATURE (34°C ± 0	0.2°C)34.00 SI	M. SNMP242	4 SIM. NIST EX	P DATE 11/27/2024	4
Run three tests using a standard solution less. Check the box corresponding to the 0.100% STANDARD - MUST READ 0.080% STANDARD - MUST READ 0.040% STANDARD - MUST READ	standard solution being BETWEEN 0.095% and BETWEEN 0.076% and	g used. (PRINTOUT A d 0.105% INCLUSIVI d 0.084% INCLUSIVI	ATTACHED) E E	it have a spread of .0	105 or
TEST 1 ◆ .097	TEST 2096		TEST 3 ▼ .096		
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) 2	(.1014) 1	(.1519) 4	(OVER .19) 0	0
List any new parts and describe any alteration established limits (use other side if necessary		vas made to restore	the instrument to opera	te satisfactorily and v	within
INSPECTING OFFICER					
SIGNATURE			PRINT NAME Cpl. B. E. Thoman #1256		
TYPE II PERMIT NUMBERIEXPIRATION DATE			TELEPHONE NUMBER		
24011 05/21/2026			(816) 622-0800		
	cohol Program, MO Dep ax, or email.	partment of Health ar	nd Senior Services, Sou	theast District Office	

AS IV Serial no: 111738 Version no: 532B

TEST RECORD 00228

Temp Date Time 210L

Air Blank: 06/08/24 20:59 .000 Calibration Check: 22 06/08/24 20:59 .097

Subject Name

MAINT TOT A)
Subject I.D.

Operator Name, I.D.

BETHONAN 20011

CLAY (0. 2.0)

AS IV Serial no: 111738 Version no: 532B

TEST RECORD 00229

Temp Date Time 210L
Air Blank: 06/08/24 21:02 .000
Calibration Check: 23 06/08/24 21:02 .096

Subject Name

MAINT TEST #L Subject I.D.

Operator Name, I.D.

B.E. THORAN 24011

CLAY CO. Z. U-

AS IV Serial no: 111738 Version no: 532B

TEST RECORD 00230

Temp Date Time 210L
Air Blank:
 06/08/24 21:04 .000
Calibration Check:
 23 06/08/24 21:04 .096

Subject Name

MAINT TEST #3
Subject I.D.

Deerator Name, I.D.

BE THOMAN 24011

Location

CLAY (0, 2, 0-

AS IV Serial no: 111738 Version no: 532B

TEST RECORD 00231

Temp Date Time 210L VOID: RFI

VOID: RFI 12 06/08/24 21:06

Subject Name
RFI 1657

Subject I.D.

Operator Name, I.D.

BETHOMAN 24011

Location

CLAY CO. Z.O.



CERTIFICATE OF ANALYSIS

Certified Alcoho 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 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 prior to each use utilizing NIST traceable weights.



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES **BREATH ALCOHOL PROGRAM**



PERMIT TYPE II

BRUCE E. THOMAN

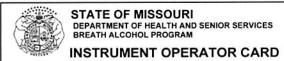
is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

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 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo. MA . . .

DATE5/21/2024	Mike Masson
DATE	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240111	Daves J. Nichelson
EXPIRES 5/21/2026	DIRECTOR OF DEPARTMENT OF HEALTH AND SERVICES
	LAB A /05.10

MO 580-0771 (6-10)



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

