

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Tall the same of t	A STATE OF THE STA					
Complete this report in d Send copy to Departmen					vhenever instrument is r	epaired.
ALCO SENSOR IV SN 111749		NAME OF AGENCY Missouri State Hi		ATE OF INSPECTION 7/01/2024		
LOCATION OF INSTRUMENT (504 S.E. Blue Parkwa		Process of the Control of the Contro			ME OF INSPECTION :21 pm	
CHECKLIST: Place a ma	k in the box by each	n item if found to be satisf			100000000-00000000000000000000000000000	d values
where determined.) Unm	arked items must be	e corrected before using	instrument.			-
✓ DIGITAL READOUT	(ALL ELEMENTS C	PERATIONAL)				
☑ TEMPERATURE OF	ALCO SENSOR (1	0°C - 40°C)				
PRINTER WORKING	PROPERLY					
☑ TIME AND DATE DI	PLAYING PROPE	RLY				
BREATH ALCOHOL AC	CURACY STANDA	RDS				
SIMULATOR SOLUT	ION		☐ COMPRESSE	D ETHANOL-GAS	MIXTURE	
☑ STANDARD SUPPL	ER GUTH LABO	RATORIES INC L	OT # <u>23390</u>	EXP. DATE <u>1</u>	0/17/2025	
SIMULATOR TEMP	RATURE (34°C ± (0.2°C) <u>34.00</u> SII	м. snMP220	6 SIM. NIS	ST EXP DATE 11/27/20	024
less. Check the box of 0.100% STAND 0.080% STAND	orresponding to the ARD - MUST READ ARD - MUST READ	n. All three tests must be e standard solution being D BETWEEN 0.095% and D BETWEEN 0.076% and D BETWEEN 0.038% and	used. (PRINTOUT A d 0.105% INCLUSIVI d 0.084% INCLUSIVI	ATTACHED) E E	d must have a spread o	f .005 or
TEST 1 • .100		TEST 2 ☞ .099		TEST 3099		
RFI DETECTOR OP	RATING					
INDICATE THE NUMBE (DO NOT INCLUDE SEL			G RANGES SINCE	THE LAST MAINT	TENANCE REPORT:	
REFUSALS 0	(004) 0	(.0509)	(.1014) 0	(.1519)	OVER .19)	0
List any new parts and destablished limits (use of			vas made to restore	the instrument to	operate satisfactorily ar	nd within
INSPECTING OFFICER	~			PRINT NAME		
• -				Benjamin Owe	ns	
TYPE II PERMIT NOMBER/EXPIRAT Permit # 230048/ Exp		7/2025		(816) 622-080	0	
Return completed repo	rt to the: Breath A		partment of Health a			ice

532B		25	2191	Z
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532	- RE	83	E	ġ.
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AS IV Se Version	TEST Temp	12 87/8	AFC Subsect	Cheriston	Locatio	504 8
AS IV Serial no: 111749 Version no: 532B TEST RECORD 00899	Temp Date Time 2101	07/01/24 19:25 .000 Calibration Check: 24 07/01/24 19:25 .099	Subject Name Fest #3	Col. B. Chopor 1423 Operator Name, I.D.	Permy 236088 Location	SON SE Blue Parking

Date Time 2101. RFI 781/24 19:27 6. auers 1423 tor Name, I.D. RECORD 68988 erial no: 111749 no: 532B Name

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

BENJAMIN A. OWENS

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 3/27/2023

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 230048

EXPIRES 3/27/2025

EXPIRES 3/27/2025

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

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 ai in Missouri.

Operator OWENS, BENJAMIN

Permit No 230048

Date Issued 3/27/2023 Date Expires 3/27/2025

