

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

#### ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

The state of the s										
Complete this report Send copy to Depart	t in duplicate at the tment of Health a	ne time of the reguland Senior Services	ar monthly p retain origi	oreventative nal in departi	maintena nent file.	ance check, and	l whenev	er instrument is	repaired.	
ALCO SENSOR IV SN 111749	NAME OF AGENCY Missouri State Highway Patrol						DATE OF INSPECTION 12/31/2024			
Troop A Zone 8 C	MENT (STREET AND CITY) Office, Odessa						TIME OF INSPECTION 12:03 pm			
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										
Name of the latest of the late		ANDANDS								
☑ SIMULATOR S	OLUTION			☐ COMF	RESSE	D ETHANOL-G	AS MIXT	URE		
✓ STANDARD S	JPPLIER GUTH	LABORATORIES	INCL	OT # 23390		EXP. DATE	10/17/2	2025		
☑ SIMULATOR T	EMPERATURE (34°C ± 0.2°C) 34.00 SIM. SN MP2327 SIM. NIST EXP DATE 11/25/2025									
less. Check the	susing a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or box corresponding to the standard solution being used. (PRINTOUT ATTACHED)  TANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE  TANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE  TANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE  TEST 2 102  TEST 3 101									
☑ 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									0	
List any new parts established limits (u			cation that	was made to	restore	the instrument	to operat	te satisfactorily a	nd within	
INSPECTING OFF	ICER					PRINT NAME				
SIGNATURE						Benjamin Owens				
TYPE II PERMIT NUMBER/EXPIRATION DATE Permit # 230048/ Expiration Date 03/27/2025						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: 111749
Version no: 532B

TEST RECORD 00943

Temp Date Time 2101
Air Blank:
12/31/24 12:04 .000
Calibration Check:
19 12/31/24 12:04 .102

Subject Name
/e5t #/
Subject Name
/e5t #/
Operator Name, I.D.

Quant 236048

Locat ion

Zone 8 Office

Zore 8 Operator Name, I.D. Location Subject I.D. Calibration Check: 20 12/31/24 12:10 .102 Subject Name Cpl. B. Quers 1425 Hir Blank: AS IV Serial no: 111749 Version no: 532B TEST RECORD - REPRINT 165× 42 TEST RECORD 00944 12/31/24 12:10 .000 Date 230018 Time 210L 9

AS IV Serial no: 111749 Version no: Calibration Check: 21 12/31/24 12:13 .101 Air Blank: Subject Name Temp 7000 B/ Subject I.D Operator Name, I.D. Location 8.6 Erm. + 230048 TEST RECORD 00945 12/31/24 12:13 .000 Date 532B Time 210L

AS IV Serial no: 111749

Version no: 532B

TEST RECORD 00946

YOUTH: RFI
12 12/31/24 12:18

Subject Name

RFI
Subject Name

RFI
Location

Location

Location

Cone 8 Office



### 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):

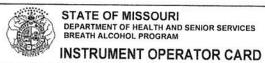
# ALCO-SENSOR IV WITH PRINTER, INTOX DMT

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.

DATE3/27/2023	Mike Massur
220040	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230048	7 1 1 1 1
EXPIRES 3/27/2025	Davis J. Nicholson
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR 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 ai

Operator OWENS, BENJAMIN Permit No 230048

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

