



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in c Send copy to Departmen							d whene	ver instrument is	repaired.
ALCO SENSOR IV SN 111750	NAME OF AGENCY Missouri State Highway Patrol				DATE OF INSPECTION 10/01/2024				
LOCATION OF INSTRUMENT (STREET AND CITY) 1503 East US-24, Moberly, MO							TIME OF INSPECTION 5:37 pm		
CHECKLIST: Place a ma	rk in the box by eac	ch item if found t	o be sati	sfactory or if	perating	within establish	ed limits	. (Write in observ	ed values
where determined.) Unm	arked items must b	e corrected bef	ore using	g instrument.					
☑ DIGITAL READOUT	(ALL ELEMENTS	OPERATIONAL	.)						
☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)									
✓ PRINTER WORKING PROPERLY									
☑ TIME AND DATE DISPLAYING PROPERLY									
BREATH ALCOHOL AC	CURACY STANDA	RDS	***************************************		·····				
☑ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE									
✓ STANDARD SUPPLIER Guth LOT # 23180 EXP. DATE 05/17/2025									
SIMULATOR TEMPERATURE (34°C ± 0.2°C) 33.99 SIM. SN MP2499 SIM. NIST EXP DATE 04/25/2025								2025	
0.080% STAND	a standard solution	n. All three test e standard solul D BETWEEN 0.0 D BETWEEN 0.0	s must b tion bein 095% an 076% an	e within ±5% g used. (PRI ed 0.105% IN ed 0.084% IN	of the s NTOUT A CLUSIVI CLUSIVI	standard value a ATTACHED) E E		t have a spread o	of .005 or
TEST 1 • .103	TEST 2 .103				TEST 3 ▼ .103				
RFI DETECTOR OPE	ERATING								
INDICATE THE NUMBER (DO NOT INCLUDE SEL				IG RANGES		THE LAST MAIN	NTENAN	ICE REPORT:	
REFUSALS 0	(004) 0	(.0509)	0	(.1014)	0	(.1519)	0	(OVER .19)	0
List any new parts and d established limits (use off			ion that	was made to	restore	the instrument t	o operat	te satisfactorily a	nd within
INSPECTING OFFICER	MARKET E	2.1					7.55		A STREET
SIGNATURE						PRINT NAME Keegan Kindl	е		
TYPE PERMIT NUMBER/EXPIRATION DATE 240037 02/05/2026						TELEPHONE NUMBER (660) 385-2132			
Return completed repor		lcohol Program fax, or email.	, MO De	partment of	lealth ar	nd Senior Servic	es, Sout	heast District Off	ice

OCT 01 2024

AS IV Serial no: 111750 Version no: 532B

TEST RECORD 00691

Temp Date Time 210L

Air Blank: 10/01/24 17:40 .000 Calibration Check:

32 10/01/24 17:40 .103

Subject Name

MAINTENANCE

Subject I.D.

Operator Name, I.D.

K.E. KINDLE, 240037

Location

1503 E. US-24

MOBERLY, MO

AS IV Serial no: 111750 Version no: 532B

TEST RECORD 00693

Temp Date Time 210L

Air Blank:

10/01/24 17:47 .000

Calibration Check: 30 10/01/24 17:47 .103

Subject Name

MAINTENANCE 3

Subject I.D.

Operator Name, I.D.

K.E. KINDLE, 240037

Location

1503 E. US-24

Modery MO

AS IV Serial no: 111750 Version no: 532B

TEST RECORD 00692

Temp Date Time 210L

Air Blank:

10/01/24 17:44 .000

Calibration Check:

31 10/01/24 17:44 .103

Subject Name

MAINTENANCE 2

Subject I.D.

Operator Name, I.D.

K.E. KINDLE, 240037

Location

1503 E. US-24

MOBERLY, MO

AS IV Serial no: 111750 Version no: 532B

TEST RECORD 00694

Temp Date Time 210L

VOID: RFI

12 10/01/24 17:51

Subject Name

RFI TEST

Subject I.D.

Operator Name, I.D.

K.E. KINDLE, 240037

Location

1503 E. US-24

MOBERLY, MO



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

KEEGAN E. KINDLE

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 2/5/2024	Mike Massur					
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY					
NUMBER 240037						
EXPIRES 2/5/2026	Daves I. nichelson					
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES					
MO 580-0771 (6-10)	LAB-4 (R6-10)					

STATE OF MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

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 Missoun.

Operator KINDLE, KEEGAN

Permit No 240037

Date Issued 2/5/2024 Date Expires 2/5/2026

