

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in duplica Send copy to Department of H						d whenev	ver instrument is repaired.	
ALCO SENSOR IV SN		NAME OF AGENCY Stone Co. Sheriff's Office			DATE OF INSPECTION			
CHECKLIST: Place a mark in the where determined.)	ne box by each	MapleS+	Calen a be satisfactory	or if operating		TIME OF I	NSPECTION	
DIGITAL READOUT (ALL			e dailig iliatidi	nent.				
TEMPERATURE OF ALCO	D SENSOR (10	0°C - 40°C)						
PRINTER WORKING PROPERLY								
TIME AND DATE DISPLA	YING PROPER	RLY						
BREATH ALCOHOL ACCURA	CY STANDAR	RDS						
SIMULATOR SOLUTION	ncheo, econor politico y interior de acceptante de trans-	and a section of the		COMPRESSE	D ETHANOL-G	AS MIXT	URE	
STANDARD SUPPLIER _	Gut	h	LOT # _	23390	EXP. DATE	[0]	Inters	
SIMULATOR TEMPERATU	JRE (34°C ± 0	.2°C) _ 34.0	SIM. SN	MPGOZ	7 SIM.	NIST EXF	DATE 03/04/2025	
Run three tests using a state less. Check the box corresponding of the c	ponding to the MUST READ MUST READ	standard solution BETWEEN 0.09 BETWEEN 0.07	on being used. 95% and 0.105 76% and 0.084	(PRINTOUT A % INCLUSIVI % INCLUSIVI	ATTACHED) E E	and must	have a spread of .005 or	
TEST 1 .100		TEST 2 .098			TEST 3 • .098			
RFI DETECTOR OPERATI	NG							
INDICATE THE NUMBER OF (DO NOT INCLUDE SELF-AD			LOWING RAN	GES SINCE	THE LAST MAI	INTENAN	CE REPORT:	
REFUSALS (00	4) 0	(.0509)	(.10	4) 0	(.1519)	0	(OVER .19)	
List any new parts and describ established limits (use other sid			n that was ma	de to restore	the instrument	to operate	e satisfactorily and within	
Changed 9 V Bat	havada araticis							
INSPECTING OFFICER SIGNATURE		PRINT NAME						
· 68hh		K.Stults						
TYPE II PERMIT NUMBER/EXPIRATION DATE					TELEPHONE NUMBER			
03/22/2024 24007	0				417-357	-6116		
Return completed report to the		cohol Program, ax, or email.	MO Departme	nt of Health ar	nd Senior Servi	ces, South	heast District Office	

AS IV Serial no: 111762 Version no: 532B

TEST RECORD 00792

9/ Temp Date Time 210L Air Blank:

06/05/24 07:31 .000 Calibration Check:

22 06/05/24 07:31 .000

AS IV Serial no: 111762 Version no: 532B

TEST RECORD 00793

Temp Date Time 210L

Air Blank:

06/05/24 07:34 .000 Calibration Check:

22 06/05/24 07:34 .100

Subject Name

Subject I.D.

Tast

Operator Name, I.D.

AS IV Serial no: 111762 Version no: 532B

TEST RECORD 00795

9/ Temp Date Time 210L

Air Blank:

06/05/24 07:41 .000

Calibration Check: 24 06/05/24 07:41 .098

Subject Name

Subject I.D.

Operator Name, I.D.

AS IV Serial no: 111762 Version no: 532B

TEST RECORD 00796

Temp Date Time 210L

UOID: RFI

12 06/05/24 07:43

Subject Name

Name, I.D.

AS IV Serial no: 111762 Version no: 532B

TEST RECORD 00794

Time 210L Temp Date

Air Blank:

06/05/24 07:39 .000

Calibration Check: 24 06/05/24 07:39 .098

Subject Name

Monthly Main

Operator Name, I.D.



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

KYLE G. STULTS

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

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 3/22/2024	Mile Mason				
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY				
NUMBER 240070					
EXPIRES 3/22/2026	Davla I. Nichelson				
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES				
MO 580-0771 (S-10)	LAB.4 (36.10)				

LAB-4 (R6-10)



The named cardholder is authorized to operate an evidential breath alcoholinstrument for the determination of the alcoholic content in breath form of expired at in Missouri.

Operator STULTS, KYLE Permit No 240070

Date Issued 3/22/2024 Date Expires 3/22/2026

