

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in duplicate a Send copy to Department of Healt			ce check, and whenev	er instrument is repaired.	
ALCO SENSOR IV SN //957)	NAME OF AGENCY DOI-National Pa	NAME OF AGENCY DOI-National Park Service		INSPECTION 1-24	
LOCATION OF INSTRUMENT (STREET AN 8928 State Highway 19, Winon			TIME OF 11	NSPECTION	
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) /8°					
✓ PRINTER WORKING PROPERLY					
☑ TIME AND DATE DISPLAYING PROPERLY					
BREATH ALCOHOL ACCURACY STANDARDS					
✓ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE				URE	
STANDARD SUPPLIER Guth Laboratories LOT # 23180 EXP. DATE 05/17/2025					
SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34,00 SIM. SN MP7615 SIM. NIST EXP DA			P DATE 10/24/2025		
 CALIBRATION CHECK – (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) □ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE □ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE □ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE 					
TEST 1 097	TEST 2 - , 097	Т	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 (004)	(.0509)	(.1014)	(.1519)	(OVER .19)	
List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).					
INSPECTING OFFICER	北京企业等企业企业		DDINT NAME		
SIGNATURE			PRINT NAME Zachary Swindle		
TYPE II PERMIT NUMBER/EXPIRATION DATE 230181 08/17/2025			TELEPHONE NUMBER (573) 351-9645		
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: 119571
Version no: 532C
TEST RECORD 00150

Temp Date Time 2101
Air Blank:
Air Blank:
11/14/24 12:11 .097
Subject Name
Subject Name
Subject I.B.

23015) 8/7/25
Operator Name, I.B.

23015) 8/7/25
Operator Name, I.B.

Location

5728 Journe Amy 14

AS IV Serial no: 119571 Version no: 532C TEST RECORD 0015: Temp Date Time 210/ Air Blank: Air Blank: Callbration Check: 19 11/14/24 12:12 .000

Subject Name

Subject Name

Subject I.D.

ZXJV 8/7/25

Operator Name, I.D.

un rema me 15588

WINDUK IN SSSEY

8728 STATE HAVE B

Location

AS IV Serial no: 119571
Version no: 5322
TEST RECORD 00153
Temp Date Time 210L
VOID: RF;
12 11/14/24 12:15
Subject Name
Su

SSSS an morin

WINDS NO GSTY



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

ZACHARY SWINDLE

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.

DATE8/17/2023	Mike Massma		
DATE	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY		
NUMBER 230181			
EXPIRES 8/17/2025	Davla J. Nichelson		
EN ITEO WITTENED	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 air in Missouri.

Operator

SWINDLE, ZACHARY

Permit No 230181

Date Expires 8/17/2025

