



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in du Send copy to Department					ever instrument is repaired.	
ALCO SENSOR IV SN 119729		NAME OF AGENCY Newton County S	NAME OF AGENCY Newton County Sheriff's Office		DF INSPECTION B/2024	
LOCATION OF INSTRUMENT (STREET AND CITY) 208 W Coler Street, Neosho, MO 64850					F INSPECTION	
CHECKLIST: Place a mar where determined.) Unma	•			g within established limi	ts. (Write in observed values	
DIGITAL READOUT						
☐ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)						
☑ PRINTER WORKING PROPERLY						
☑ TIME AND DATE DISPLAYING PROPERLY						
BREATH ALCOHOL ACC	CURACY STANDARI)S		The state of the s		
☑ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE						
🛮 STANDARD SUPPLI	ER Guth Laborator	es L	OT # 23390	EXP. DATE 10/17	7/2025	
SIMULATOR TEMPERATURE (34°C \pm 0.2°C) 34.0 SIM. SN DR 6930 SIM. NIST EXP DATE 07/23/2025						
0.100% STANDA 0.080% STANDA	ARD - MUST READ E ARD - MUST READ E	tandard solution being ETWEEN 0.095% and ETWEEN 0.076% and ETWEEN 0.038% and	1 0.105% INCLUSIV 1 0.084% INCLUSIV	'E 'E		
TEST 1 🖛 .103	Т	EST 2 🖛 .102		TEST 3 ☞ .102		
RFI DETECTOR OPE	RATING					
INDICATE THE NUMBER (DO NOT INCLUDE SEL			G RANGES SINCE	THE LAST MAINTEN	ANCE REPORT:	
REFUSALS	(004)	(.0509)	(.1014) 1	(.1519)	(OVER .19)	
List any new parts and destablished limits (use other			vas made to restore	the instrument to ope	rate satisfactorily and within	
INSPECTING OFFICER						
SIGNATURE			PRINT NAME Taylor Lombard			
TYPE ILPERMIT NUMBER/EXPIRATION DATE 230169 08/08/2025				TELEPHONE NUMBER (417) 451-8300		
Return completed repor	t to the: Breath Alco		partment of Health a	and Senior Services, So	outheast District Office	

AS TV Serial no: 119729
Version no: 532C

TEST RECORD 00154
9/
Temp Date Time 210L

AIR Blank: 10/18/24 10:04 .000
Calibration Check: 21 10/18/24 10:04 .103

Subject Name
Test Subject I.D.

Test \
Operator Name, I.D.

Taylor Lombard 23069
Location

ZOR W Coler St

Neosho, Mo 64850

AS IV Serial no: 119729
Version no: 532C

TEST RECORD 00156

Jemp Date Time 210L

Air Blank: 10/18/24 10:20 .000
Calibration Check: 22 10/18/24 10:20 .102

Subject Name

Tost
Subject I.D.

Test 3
Operator Name, I.D.

Taylor London 230169
Location

ZOS W Colers 3

AS IV Serial no: 119729
Version no: 532C

TEST RECORD 00155

Temp Date Time 210L

Air Blank: 10/18/24 10:07 .000
Calibration Check: 23 10/18/24 10:07 .102

Subject Name

Tost
Subject I.D.
Cost Z

Operator Name. I.D.

Location

208 W Coker St

Neoslo, MO 64850

AS IV Serial no: 119729
Version no: 532C

TEST RECORD 00157

Temp Date Time 210L

VOID: RFI
12 10/18/24 10:24

Subject Name

Subject Name

Subject I.D.

RFT
Operator Name. I.D.

Taylor Combond 230/61

Location

208 W Color St

Weosho, MO 64850



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

TAYLOR LOMBARD

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 sai 577.020 through 577.041, RSMo and 306.111 through 306.119	mpte of expired air. Permit issued under the provisions of sections RSMo
	Mile Masson
DATE8/8/2023	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230169	
EXPIRES 8/8/2025	Daves I. Nichelson
MO 580-0771 (6-10)	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SERVICES BREATH ALCOHOL PROGRAM

INSTRUMENT OPERATOR CARD

The named cardholder is euthorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.

Operator LOMBARD, TAYLOR

Permit No 230169

Date Issued 8/8/2023 Date Expires 8/8/2025

