



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 at the time of the regular monthly preventative maintenance check, and whenever instrument is repaired. Send copy to Department of Health and Senior Services; retain original in department file.

ALCO SENSOR IV SN 119730	NAME OF AGENCY Palmyra Police Department	DATE OF INSPECTION 12/03/2024
LOCATION OF INSTRUMENT (STREET AND CITY) 200 N. Main St. Palmyra Mo. 63461		TIME OF INSPECTION 11:06 am

**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**

- SIMULATOR SOLUTION  COMPRESSED ETHANOL-GAS MIXTURE
- STANDARD SUPPLIER Guth Laboratories LOT # 24110 EXP. DATE 03/05/2026
- SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.0 SIM. SN DR5308 SIM. NIST EXP DATE 07/23/2025

- 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 ← .095	TEST 2 ← .096	TEST 3 ← .095
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- 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-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	(OVER .19)	0
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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**

SIGNATURE Michael L. Baker	PRINT NAME Michael L. Baker
TYPE II PERMIT NUMBER/EXPIRATION DATE 230025/02/14/2025	TELEPHONE NUMBER (573) 769-5540

**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: 119730  
Version no: 532C

TEST RECORD 00208

Temp Date Time 21<sup>9/</sup>OL

Air Blank:  
12/03/24 11:06 .000  
Calibration Check:  
21 12/03/24 11:06 .096

Subject Name  
*Calibration check*

Subject I.D.  
*Michael BAKER*

Operator Name, I.D.  
*Palmyra P.D.*

Location

AS IV Serial no: 119730  
Version no: 532C

TEST RECORD 00210

Temp Date Time 23<sup>9/</sup>OL

Air Blank:  
12/03/24 11:10 .000  
Calibration Check:  
23 12/03/24 11:10 .095

Subject Name  
*Calibration check*

Subject I.D.  
*Michael BAKER*

Operator Name, I.D.  
*Palmyra P.D.*

Location

AS IV Serial no: 119730  
Version no: 532C

TEST RECORD 00207

Temp Date Time 21<sup>9/</sup>OL

Air Blank:  
12/03/24 11:04 .000  
Calibration Check:  
21 12/03/24 11:04 .095

Subject Name  
*Calibration check*

Subject I.D.  
*Michael BAKER*

Operator Name, I.D.  
*Palmyra P.D.*

Location

AS IV Serial no: 119730  
Version no: 532C

TEST RECORD 00211

Temp Date Time 12<sup>9/</sup>OL

VOID: RFI  
12 12/03/24 11:11

Subject Name  
*RFI check*

Subject I.D.  
*Michael BAKER*

Operator Name, I.D.  
*Palmyra P.D.*

Location



**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **24110** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **March 6, 2024**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1215%** (w/vol) ethyl alcohol. The expiration date for this lot number is **March 5, 2026** at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L**  $\pm 3\%$ .

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

2

PERMIT  
TYPE II

MICHAEL L. BAKER

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**

the determination of the alcohol content of blood from a sample of expired air. Permit issued under the provisions of sections 7.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 2/14/2023

MBER 230025

PIRES 2/14/2025

10-0771 (8-10)

*Mike Mason*  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Paula F. Nielson*  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R0-10)

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

**INSTRUMENT OPERATOR CARD**

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

Operator: **BAKER, MICHAEL**  
Permit No: **230025**  
Date Issued: **2/14/2023**      Date Expires: **2/14/2025**

