



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 119733 | NAME OF AGENCY Hollister Police D | | DATE OF INSPECTION 10/31/2024 | | | |
| LOCATION OF INSTRUMENT (STREET AND CITY) 240 Hollister Pointe Dr, Hollister, MO 65672 | | | | TIME OF INSPECTION 3:30 pm | | |
| 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 Labs LOT # 24110 EXP. DATE 03/05/2026 | | | | | | |
| ☑ SIMULATOR TEMPERATURE (34°C ± 0 |).2°C) <u>34.0</u> SIN | M. SNSD 273 | 2 SIM. N | NIST EXP DATE <u>03/21/2025</u> | | |
| 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 🖛 .099 | TEST 2099 | | TEST 3 ☞ .099 | | | |
| ☑ RFI DETECTOR OPERATING | | | | | | |
| INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS) | | | | | | |
| | 1 | | | | l | |
| REFUSALS 0 (004) 0 List any new parts and describe any alterati established limits (use other side if necessar | on or modification that v | | (.1519) the instrument | 0 to operat | (OVER .19) 0 te satisfactorily and within | |
| INSPECTING OFFICER | | | | | | |
| BIGNATURE 1 508 | | | PRINT NAME Cpl. David Brinegar | | | |
| TYPE II PERMIT NUMBERVEX PIRATION DATE 230040 exp 03/27/2025 | | | TELEPHONE NUMBER (417) 334-3000 | | | |
| 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: 119733
Version no: 5320

TEST RECORD 00160

Temp Date Time 210L

Air Blank: 10/31/24 15:33 .000
Calibration Check: 23 10/31/24 15:33 .099

Subject Name
Oct Maintenance
Subject I.D.
Iest (
Operator Name. I.D.

Bringar 230042
Location
240 Mellister Pointe Dr

Mollister MO

AS IV Serial no: 119733
Version no: 532C

TEST RECORD 00161

Temp Date Time 210L

Air Blank: 10/31/24 15:35 .000
Calibration Check: 23 10/31/24 15:35 .099

Subject Name
Oct Maintenance
Subject J.D.

Test 2
Operator Name, I.D.

Brinegar 230042
Location
240 Mollister Pointe Dr

Hollister, MO

AS IV Serial no: 119733
Version no: 532C

TEST RECORD 00162

Temp Date Time 210L

Air Blank: 10/31/24 15:37 .000
Calibration Check: 24 10/31/24 15:37 .099

Subject Name

Oct Maintenance
Subject J.D.

Test 5

Operator Name, I.D.

Brineaar 230042
Location
240 Hollister Painte Pr

Hellster Mo

AS IV Serial no: 119733
Version no: 532C

TEST RECORD 00163

Temp Date Time 210L

VOID: RFI.
12 10/31/24 15:39

Subject Name

Oct Maintenance

Subject I.D.

Operator Name. I.D.

Brineger 250042

Location

240 Hollister famile. Dr.

1d3/34



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°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

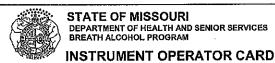
DAVID W. BRINEGAR

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

MCI: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 all in Missouti

Operator BRINEGAR, DAVID

Permit No 230042

Date Issued 3/27/2023 Date Expires 3/27/2025

