

## MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

# RECEIVED By Tracy Crews at 1:07 pm, Mar 28, 2025

#### ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

41661.							
Complete this report in d Send copy to Departmen		770			never instrument is repaired.		
ALCO SENSOR IV SN 097442		NAME OF AGENCY Missouri State Highway Patrol			OF INSPECTION 1/2025		
LOCATION OF INSTRUMENT (STREET AND CITY) Troop G Headquarters, Willow Springs					OF INSPECTION F 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.							
			instrument.				
✓ DIGITAL READOUT	(ALL ELEMENTS (	OPERATIONAL)	0				
▼ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)							
PRINTER WORKING	G PROPERLY						
✓ TIME AND DATE DIS	SPLAYING PROPE	RLY					
BREATH ALCOHOL AC	CURACY STANDA	RDS					
✓ SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE							
STANDARD SUPPLIER Guth Laboratories Inc LOT			OT# 24310	EXP. DATE	27/2026		
SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.01 SIM. SN MP2323				SIM. NIST EXP DATE 01/31/2026			
less. Check the box of 0.100% STAND	corresponding to the ARD - MUST READ ARD - MUST READ	e standard solution being BETWEEN 0.095% and BETWEEN 0.076% and BETWEEN 0.038% and	j used. (PRINTOUT A d 0.105% INCLUSIVI d 0.084% INCLUSIVI	ATTACHED) E E	ust have a spread of .005 or		
TEST 1 <b>▼</b> .101		TEST 2 <b>▼</b> .100		TEST 3 <b>▼</b> .101			
✓RFI DETECTOR OPE	ERATING		10				
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)							
REFUSALS 0	(004) 0	(.0509)	(.1014) 0	(.1519) 0	(OVER .19) <sup>0</sup>		
List any new parts and d established limits (use off			was made to restore	the instrument to ope	erate satisfactorily and within		
INSPECTING OFFICER SIGNATURE				PRINT NAME			
· Turny				Thomas Meyer			
TYPE II PERMIT NUMBER/EXPIRAT	240173	08/16/2026	0	TELEPHONE NUMBER (417-46)9-3121			
Return completed repor		lcohol Program, MO De fax, or email.	partment of Health a	nd Senior Services, S	outheast District Office		

Version no: 18328 097442

Version no: 18328 097442

TEST RECORD 00477

Temp Date Time 210L

Air Blank:
03/21/25 21:19 .000
Calibration Check: 101
Subject Name

Subject I.D.

Operator Name. I.D.

Location

Location

Location

Whules Spring

AS IV Serial no: 097442
Version no: 5328

TEST RECORD 00478

Temp Date Time 210L
Air Blank: 03/21/25 21:21 .000
Calibration Check: 100
Subject Name
Subject I.D.

Operator Name. I.D.
Location
Trow G Ho
Location
Trow G Ho

AS IV Serial no: 097442
Version no: 5328

TEST RECORD 00479
Temp Data Time 290
Air Blank: 03/21/25 21:23 .000
Callbration Check: 22 03/21/25 21:23 .101
Subject Name
Subject I.D.

Decretor Name, 1.D.

T. MEYER 240173

Location

Troop G 416

Wallow Springs

Version no: 097442

Version no: 5328

TEST RECORD 00480

Temp Date Time 210L

VOID: RFI
12 03/21/25 21:24

Subject Name

Subject I.D.

Operator Name. I.D.

1. MEYEL 240173
Location
Location

Location

Dillow Springs



### STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



## PERMIT TYPE II

### THOMAS W. MEYER

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

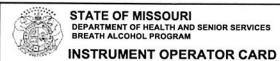
### ALCO-SENSOR IV WITH PRINTER, INTOX DMT

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.

DATE <b>8/16/2024</b>	Mike Wassin
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240173	
EXPIRES 8/16/2026	Davla J. Nichelson
MO 500 0774 (C 10)	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 MEYER, THOMAS

Permit No 240173

Date Issued 8/16/2024 Date Expires 8/16/2026





#### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 24310 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on August 28, 2024, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1209% (w/vol) ethyl alcohol. The expiration date for this lot number is August 27, 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.