



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 <u>099362</u>	NAME OF AGENCY <u>509 SFS WAFB</u>	DATE OF INSPECTION <u>3 MAR 2025</u>
LOCATION OF INSTRUMENT (STREET AND CITY) <u>1031 VANDENBERG AVENUE, WHITEMAN AFB</u>		TIME OF INSPECTION <u>0854</u>

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 LOT # 24310 EXP. DATE 27 AUG 2026

SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34°C SIM. SN MP6026 SIM. NIST EXP DATE 2 JAN 2026

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 = .098

TEST 2 = .097

TEST 3 = .097

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	<u>0</u>	(0-.04)	<u>0</u>	(.05-.09)	<u>0</u>	(.10-.14)	<u>0</u>	(.15-.19)	<u>0</u>	(OVER .19)	<u>0</u>
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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 Brady L Grimm

PRINT NAME BRADY L GRIMM

TYPE II PERMIT NUMBER/EXPIRATION DATE  
240183

TELEPHONE NUMBER  
660 687 1459

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: 099362  
Version no: 532B

TEST RECORD 02040 s/  
Temp Date Time 210L

Air Blank: 03/03/25 09:17 .000  
Subject Test: Auto  
23 03/03/25 09:17 .098

Subject Name  
BRADY L GRIMM  
Subject I.D.  
240183/29 AUG 2026  
Operator Name, I.D.  
\_\_\_\_\_  
Location  
\_\_\_\_\_

AS IV Serial no: 099362  
Version no: 532B

TEST RECORD 02041 s/  
Temp Date Time 210L

Air Blank: 03/03/25 09:19 .000  
Subject Test: Auto  
23 03/03/25 09:19 .097

Subject Name  
BRADY L GRIMM  
Subject I.D.  
240183/29 AUG 2026  
Operator Name, I.D.  
\_\_\_\_\_  
Location  
\_\_\_\_\_

AS IV Serial no: 099362  
Version no: 532B

TEST RECORD 02042 s/  
Temp Date Time 210L

Air Blank: 03/03/25 09:20 .000  
Subject Test: Auto  
24 03/03/25 09:20 .097

Subject Name  
BRADY L GRIMM  
Subject I.D.  
240183/29 AUG 2026  
Operator Name, I.D.  
\_\_\_\_\_  
Location  
\_\_\_\_\_

AS IV Serial no: 099362  
Version no: 532B

TEST RECORD 02043 s/  
Temp Date Time 210L

VOID: RFI  
12 03/03/25 09:22

Subject Name  
BRADY L GRIMM  
Subject I.D.  
240183/29 AUG 2026  
Operator Name, I.D.  
\_\_\_\_\_  
Location  
\_\_\_\_\_



## GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-564-5470

### 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  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , 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

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**PERMIT**  
**TYPE II**  
**BRADY GRIMM**

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 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 8/29/2024

*Mike Massman*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

NUMBER 240183

*Paula J. Nielsen*

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

EXPIRES 8/29/2026

MO 580-0771 (6-10)

LAB-4 (R6-10)

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

**INSTRUMENT OPERATOR CARD**

*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 GRIMM, BRADY  
 Permit No 240183  
 Date Issued 8/29/2024 Date Expires 8/29/2026

