

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

REPORT#7

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

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	NAME OF AGENCY Police	Deat DATE OF INSPECTION 12/13/25			
LOCATION OF INSTRUMENT (STREET, AND CITY)  INC. PART F 35  CHECKLIST: Place a mark in the box by eac where determined.) Unmarked items must be	Sull'vars MO 63081 h item if found to be satisfactory or if operating	TIME OF INSPECTION			
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)					
TEMPERATURE OF ALCO SENSOR (10°C - 40°C) 25°2					
PRINTER WORKING PROPERLY					
TIME AND DATE DISPLAYING PROPE	RLY				
BREATH ALCOHOL ACCURACY STANDA	RDS				
SIMULATOR SOLUTION	☐ COMPRESSE	D ETHANOL-GAS MIXTURE			
STANDARD SUPPLIER Louth	Labs LOT#24310	EXP. DATE 08/27/26			
SIMULATOR TEMPERATURE (34°C ±	0.2°C) 34°C SIM. SN MP387	2 SIM. NIST EXP DATE 05/07/25			
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 . 099 75	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)					
REFUSALS (004)	(.0509) (.1014)	(.1519) 3 (OVER .19) 8			
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).  Instrument is operate satisfactorily and within D.O. H. specifications.					
		APPLE SON THE STATE OF THE STAT			
INSRECTING (C) HAIGE (C)	J. H	PRINT NAME			
TYPE II PERMIT NEW REGISTRATION DATE		TELEPHONE NUMBER			
230126	06/14/25	377-468-8001			
	Moohol Pro <mark>gram, MO Departm</mark> ent of Health a fax, or email.	nd Senior Services, Southeast District Office			

	Operator Name, I.D.	Subject I. I.	AS IV Serial no: 182466  Version no: 532B  TEST RECORD 81572  Temp Date Time 2181  Air Blank: 62/13/25 89:42 .888  Calibration Check: 25 82/13/25 89:42 .898  Subject Name
	Operator Name, I.D. Location	Subject I.D.	AS IU Serial no: 182466 Uersion no: 5328  TEST RECORD 81573  Temp Date Time 2191 Air Blank: 82/13/25 89:44 .008 Calibration Check: 25 82/13/25 89:44 .699 Subject Name
	Operator Name, I.D.  Location	Subject I.D.	ns IV Serial no: 182466 Version no: 532B  TEST RECORD 81574  Temp Date Time 218L  fir Blank:
	Location	Operator Name, I.D.	AS IU Serial no: 102466 Uersion no: 532B  TEST RECORD 01575  Temp Date Time 219L  UOID: RFI 12 02/13/25 09:48  Subject Name



#### 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.



## STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM



# PERMIT TYPE II

# GREGORY A. WEST

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.

DATE6/14/2023	Mile Mason
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230126	
EXPIRES 6/14/2025	Daven J. Nichelson
MO 580-0771 (6-10)	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 WEST, GREGORY Permit No 230126

Date Issued 6/14/2023

Date Expires 6/14/2025

