RECEIVED

By Tracy Crews at 11:29 am, Mar 12, 2025



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

A MILETON OF THE PROPERTY OF T		
Complete this report in duplicate at the time of Send copy to Department of Health and Senior	the regular monthly preventative mainter Services; retain original in department file	nance check, and whenever instrument is repaired.
ALCO SENSOR IV SN 105448 / Printer 09B.3591.016	NAME OF AGENCY Clinton P.D.	DATE OF INSPECTION 03/11.2/2025
LOCATION OF INSTRUMENT (STREET AND CITY) 101 East Ohio Street, Clinton, MO 6		TIME OF INSPECTION 2:13 p.m.
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 co	prrected before using instrument.	g Thim octabilities willes (VIIIIe III observed Values
DIGITAL READOUT (ALL ELEMENTS OPE	RATIONAL)	
▼ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)		
PRINTER WORKING PROPERLY		
TIME AND DATE DISPLAYING PROPERLY		
BREATH ALCOHOL ACCURACY STANDARDS	S	
SIMULATOR SOLUTION		ED ETHANOL-GAS MIXTURE
✓ STANDARD SUPPLIER Guth Laborate	ories, Inc. LOT # 24310	EXP. DATE 08/27/2026
SIMULATOR TEMPERATURE (34°C ± 0.2°	c) 34.0 sim. sn SD3509	SIM. NIST EXP DATE 08/07/2025
0.080% STANDARD - MUST READ BE	ETWEEN 0.095% and 0.105% INCLUSIVETWEEN 0.076% and 0.084% INCLUSIVETWEEN 0.038% and 0.042% INCLUSIVE	/E /E
TEST 1 * .100	ST 2	TEST 3
RFI DETECTOR OPERATING		
INDICATE THE NUMBER OF BREATH TESTS (DO NOT INCLUDE SELF-ADMINISTERED TE	IN THE FOLLOWING RANGES SINCE (STS)	THE LAST MAINTENANCE REPORT:
REFUSALS 0 (004) 0	.0509, 0 (10-14) 0	(.1519) 1 (OVER .19) 0
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). 1) Changed time I have a head for Daylight Savings time 2) Calibrated instrument		
3 2 111 1	The state of the s	
2) Calibrated instrum	est.	
INSPECTING OFFICER SIGNATURE	Miles Miles Andrews Co.	PRINT NAME Michael Nelson
TYPE II PERMIT NUMBER/EXPIRATION DATE 240137 /	06-14-2026	TELEPHONE NUMBER (660) 885-2679
Return completed report to the: Breath Aicol by mail, fax,		and Senior Services, Southeast District Office

AS IV Serial no: 105448 Version no: 532B

TEST RECORD 02001

210L Date Air Blank:

03/11/25 14:13 .000 Calibration: 26 03/11/25 14:13 .100

Subject Name

Calibration

Subject I.D.

NIA Operator Name, I.D.

M. NEJSON 240137

Location

Clinton P.D.

101 E. Ohio St. Clinton, MO 64735

AS IV Serial no: 105448 Version no: 532B

TEST RECORD 02002

Date

Air Blank: 03/11/25 14:15 .000 Calibration Check: 27 03/11/25 14:15 .100

Subject Name

Operator Name, I.D.

M. NElson # 240137

Location

Clinton P.D.

101 E. Ohio St. Cl: NOW, MO 64735

AS IV Serial no: 105448 Version no: 532B

TEST RECORD 02003

219L

Air Blank:

03/11/25 14:17 .000

Calibration Check: 28 03/11/25 14:17 .099

Subject Name

TEST#2

Subject I.D.

Operator Name: I.D.

M. NEISON #240137

Location

Clinton P.D.

101 E. Ohio St. C1: wton, MO 64735

AS IV Serial no: 105448 Version no: 532B

TEST RECORD

9/ 210L

Air Blank: 03/11/25 14:19 .000 Calibration Check:

28 03/11/25 14:19 .099

Subject Name

TEST #3

M. NESSON # 240137

Location

Clinton P.D.

101 E. Ohio St. Clinton, MO 64735

AS IV Serial no: 105448 Version no: 532B

TEST RECORD

Date 210L

UOID: RFI 12 03/11/25 14:23

Subject Name

RFI

Subject I.D.

Operator Name: I.D.

M. Nelson #240137

Clinton P.D.

101 E. Ohio St Cl. wton, MO 64735

AS IV Serial no: 105448 Version no: 532B

97 210L Temp Date Time

Air Blank:

03/11/25 14:25 .000

Subject Test: Auto 28 03/11/25 14:25 .000

Subject Name

SEIF

Operator Name,

M, NEISON

Location

Clinton P.D.

101 E. Ohio S Clinton, MO 64735



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

MICHAEL S. NELSON

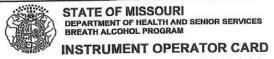
is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

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. Mike Massim DATE ____6/14/2024 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY NUMBER 240137 Davla J. nichelson EXPIRES 6/14/2026 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 a in Missouri.

NELSON, MICHAEL Operator **Permit No** 240137

Date Issued 6/14/2024

Date Expires 6/14/2026

