





MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

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

REPORT #7

								and the second state of th		
Complete this report in Send copy to Departme	duplicate at the time nt of Health and Ser	of the regular nior Services; re	monthly etain orig	preventative	mainter	ance check, ar	d whene	ever instrument i	s repaired.	
ALCO SENSOR IV SN 108267	NAME OF AGENCY Missouri State Highway Patrol					DATE OF INSPECTION 03/04/2025				
LOCATION OF INSTRUMENT (STREET AND CITY) 504 SE Blue Parkway, Lee's Summit, Mo. 64063							TIME OF INSPECTION 9:15 pm			
CHECKLIST: Place a m	ark in the box by eac	h item if found t	o be sati	sfactory or if	operating	within establish			ved values	
where determined.) Unn				g instrument	•			-		
✓ DIGITAL READOUT	Γ (ALL ELEMENTS (	PERATIONAL	.)							
✓ TEMPERATURE O	F ALCO SENSOR (1	0°C - 40°C)			_					
✓ PRINTER WORKIN	G PROPERLY									
☑ TIME AND DATE D	ISPLAYING PROPE	RLY								
BREATH ALCOHOL AC	CURACY STANDA	RDS								
✓ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE										
✓ STANDARD SUPPLIER Guth Laboratories LOT # 23390 EXP. DATE 10/17/2025										
☑ SIMULATOR TEMPERATURE (34°C ± 0.2°C) 34.00 SIM. SN MP2206 SIM. NIST EXP DATE 12/13/2025										
☐ 0.080% STAND ☐ 0.040% STAND	g a standard solution corresponding to the PARD - MUST READ PARD - MUST READ PARD - MUST READ	n. All three test standard solut BETWEEN 0.0 BETWEEN 0.0 BETWEEN 0.0	s must b tion being 095% an 076% an 038% an	e within ±5% g used. (PRI d 0.105% IN d 0.084% IN	6 of the s NTOUT A ICLUSIVI	standard value a ATTACHED) = = =	and mus	t have a spread	of .005 or	
0.29		TEST 2    .098				TEST 3   .098				
RFI DETECTOR OP	ERATING									
INDICATE THE NUMBE (DO NOT INCLUDE SEL	R OF BREATH TES -F-ADMINISTERED	TS IN THE FO TESTS)	LLOWIN	G RANGES	SINCE	THE LAST MAI	NTENAN	NCE REPORT:		
REFUSALS	(004)	(.0509)	3	(.1014)	3	(.1519)	2	(OVER .19)	4	
List any new parts and cestablished limits (use of ADJUST TIME	describe any alteration her side if necessary	on or modificati	on that v	vas made to	restore	the instrument	to operat	te satisfactorily a	and within	
INSPECTING OFFICER										
SIGNATURE Daniel	7. Culy	3				PRINT NAME Tpr. D.T.Crai	g #561			
19PE II PERMIT NUMBER/EXPIRAT 230044 03/27/2025						(816) 622-08				
Return completed repor	rt to the: Breath Ale	cohol Program,	MO Dep	partment of I	Health an	d Senior Servic	es, Sout	heast District Of	fice	

HADER .E.I .ems/ noteneed emek toetdus Calibration Check: Ze 03/04/25 Z1:50 .098 000° 09:17 97/40/60 Air Blank: SINI ⊕WiT IESI MECOMD 00213 Version no: 532B AS IV Serial no: 188267

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Location (راه، کع .U.I rameM moterago

.U.I ipaidua emeM toecdus Calibration Check: 23 03/04/25 Zi:46.100 03/04/52 21:46 Temp eted LESI KECOKD 00211 :ou uoţsJ∂A 235B AS IV Serial no: 108267

.U.I kameM moderaq0

AS IV Serial no: 188267 Version no: 532E TEST RECORD 00514 UOID: RFI 12 83/84/25 Date Temp



#### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 23390 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 18, 2023, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1207% (w/vol) ethyl alcohol. The expiration date for this lot number is October 17, 2025 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 **DAVID T. CRAIG**

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.

DATE3/27/2023	Mike Massur
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230044	
	Davea I. Nichelson
EXPIRES 3/27/2025	Tower -s. 1 felselson
	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES
MO 580-0771 (6-10)	

MO 580-0771 (6-10)

LAB-4 (R6-10)

