





MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Complete this report in d Send copy to Departmen							d whenev	ver instrument i	s repaired.	
ALCO SENSOR IV SN 111319						(6-1-6)	DATE OF INSPECTION 01/24/2025			
LOCATION OF INSTRUMENT (STREET AND CITY) 116 West Green Street , Piedmont							TIME OF INSPECTION 0800			
CHECKLIST: Place a ma where determined.) Unma					operating	within establish	ned limits.	(Write in obser	ved values	
✓ DIGITAL READOUT	(ALL ELEMENTS (PERATIONA	L)							
✓ TEMPERATURE OF	ALCO SENSOR (1	0°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 SUPPL	_{IER} Guth Labro	ratories	L	.OT # <u>241</u>	10	EXP. DATE	03/05/	/2026		
SIMULATOR TEMPE	ERATURE (34°C ± 0	_{0.2°C)} 34.0	c sı	M. SN 225	7	SIM.	NIST EXF	DATE 12/02	2/2026	
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 ₹.098				TEST 3 ▼ .098				
✓RFI DETECTOR OPE	ERATING					-				
INDICATE THE NUMBER			OLLOWIN	IG RANGES	SINCE	THE LAST MA	INTENAN	ICE REPORT:		
REFUSALS 0	(004)	(.0509)	0	(.1014)	0	(.1519)	0	(OVER .19)	0	
List any new parts and destablished limits (use of	•		ation that v	was made to	restore	the instrument	to operat	e satisfactorily	and within	
INSPECTING OFFICER										
SIGNATURE Campbell 240241/3284						PRINT NAME Shaun Campbell				
TYPE II PERMIT NUMBER/EXPIRAT	1 / 11/27	11/27/2026				TELEPHONE NUMBER (\$73) 223-4300				
Return completed repo		lcohol Progra fax, or email.		partment of	Health a	nd Senior Servi			Office	

AS IV Serial no: 111319 AS IV Serial no: 111319 AS IV Serial no: 111319 Version no: 532B Version no: 532B Version no: 532B TEST RECORD 00568 TEST RECORD TEST RECORD 00567 00566 9/ 9/ 9/ 2101 210L Date 210L Temp Date Time Time Date Air Blank: Air Blank: Air Blank: 01/24/25 08:11 .000 01/24/25 08:13 .000 01/24/25 08:15 .000 Subject Test: Man 21 01/24/25 **08:**11 .098 Subject Test: Man Subject Test: Man 22 01/24/25 08:15 .098 21 01/24/25 08:13 .098 Subject Name Subject Name Subject Name Test Test Test Subject I.D. Subject I.D. Three One Derator Name, I.D. Name: I.D. O<u>p</u>erator Name, I.D. Campbell Ille W. Green St 116 W. Green St 116 W. Green St Predmont, Molo3957 Predmont, Mo 63957 Piedmond, Ma 63957

Picamont 1	116 W. Con	Sperator Name	Subject I.D.	Subject Name	00ID: RFI 12 01/24/25	Tenn Date	TEST RECOR	AS IV Serial Version noi
4 63957	sen St	24024		A THE STATE OF THE	5	H. P.		70. 111319



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 24110 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 6, 2024, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1215% (w/vol) ethyl alcohol. The expiration date for this lot number is March 5, 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

SHAUN P. CAMPBELL

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

NUMBER **240241**EXPIRES **11/27/2026**

MO 580-0771 (6-10)

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

Davea J. Michelson

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 CAMPBELL, SHAUN

Permit No 240241

