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 Send copy to Department of Health and Se				whenev	ver instrument is	repaired.	
ALCO SENSOR IV SN 111635	NAME OF AGENCY Missouri State Highway Patrol			DATE OF INSPECTION 03/11/2025			
LOCATION OF INSTRUMENT (STREET AND CITY) 3525 North Belt Highway, Saint Joseph, Missouri 64506				TIME OF INSPECTION 8:47 pm			
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 STANDA	RDS						
✓ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE							
✓ STANDARD SUPPLIER Guth LOT # 24310 EXP. DATE 08/27/2026							
☑ SIMULATOR TEMPERATURE (34°C ±	0.2°C) <u>34.01</u> SI	M. SNMP231	10 SIM. N	IST EXF	P DATE 01/31/20	026	
Run three tests using a standard solution less. Check the box corresponding to the 0.100% STANDARD - MUST REAL 0.080% STANDARD - MUST REAL 0.040% STANDARD - MUST REAL	e standard solution being D BETWEEN 0.095% and D BETWEEN 0.076% and	i used. (PRINTOUT) d 0.105% INCLUSIV d 0.084% INCLUSIV	ATTACHED) E E	nd must	have a spread of	f .005 or	
TEST 1 .101	TEST 2 .101		TEST 3 ■ .100				
☑ 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 0 (004) 0	(.0509)	(.1014) 1	(.1519)	0	(OVER .19)	0	
List any new parts and describe any alterative established limits (use other side if necessary TIME CORRECTED.	on or modification that vy).	vas made to restore	the instrument to	operati	e satisfactorily an	d within	
INSPECTING OFFICER							
SIGNATURE			PRINT NAME				
TYPE II PERMIT NUMBER/EXPIRATION DATE			Sean P. Gomez				
240259 12/13/2026			(816) 387-234	5			
Return completed report to the: Breath A by mail,	lcohol Program, MO Der fax, or email.	partment of Health a	nd Senior Service	s, South	heast District Offic	е	

AS I W/PRINTER 111635 SIMULATOR

MP2314

MARCH 11,2025

AS IV Serial no: 111635 Version no: 532B

TEST RECORD 00234

Temp Date Time 210L Air Blank:

03/11/25 20:47 .000 Calibration Check: 26 03/11/25 20:47 .101

Subject Name

SEAN GOMEZ Subject I.D.

240259

Operator Name, I.D.

3525 N. BELT HWY Location ST. SOSEPH, MOD

TROOP H

AS IV Serial no: 111635 Version no: 532B

TEST RECORD 00235

Temp Date Time 210L

Air Blank:
03/11/25 20:50 .000
Calibration Check:
27 03/11/25 20:50 .101

Subject Name

SEAN GOMEZ
Subject I.D.

240259 Operator Name, I.D.

3525 N. BELT HWY Location ST. JOSEPH, MO

AS IV Serial no: 111635 Version no: 532B

TEST RECORD 00236

Temp Date Time 210L

Air Blank: 03/11/25 20:53 .000 Calibration Check: 28 03/11/25 20:53 .100

Subject Name

SEAN GOMEZ Subject I.D.

Subject I.D.

246259 Operator Name, I.D.

3525 N. BELT HWY Location ST. JOSEPH, MO

TROOP H

AS IV Serial no: 111635 Version no: 532B

TEST RECORD 00237

Temp Date Time 210L

VOID: RFI

12 03/11/25 20:56

Subject Name

SEAN GOMEZ

Subject I.D.

240259

Operator Name, I.D.

3525 N. BECT HWY Location St. SasEpH, Mo

TROOP H



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

SEAN P. GOMEZ

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 sat 577.020 through 577.041, RSMo and 306.111 through 306.119	mple of expired air. Permit issued under the provisions of sections R RSMo.
377.020 through 377.041, 110110 and 000.111 anough 000.110	
DATE12/13/2024	DIRECTOR STATE PUBLIC HEALTH LABORATORY

Davla J. Nichelson

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

MO 580 0771 (6 10)

NUMBER 240259

EXPIRES 12/13/2026



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 ail in Missouri

Operator GOMEZ, SEAN

Permit No 240259

Date Issued 12/13/2024 Date Expires 12/13/2026

