

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 tim Send copy to Department of Health and Se				ver instrument is repaired.	
ALCO SENSOR IV SN 111648	NAME OF AGENCY Missouri State Hi	ighway Patrol	DATE OF 02/04/	INSPECTION 2025	
LOCATION OF INSTRUMENT (STREET AND CITY) 891 Technology Drive, Weldon Spring (Mobile Instrument)			TIME OF 9:04 p	INSPECTION om	
CHECKLIST: Place a mark in the box by ea where determined.) Unmarked items must			within established limits	s. (Write in observed values	
☑ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)					
☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)					
PRINTER WORKING PROPERLY					
☑ TIME AND DATE DISPLAYING PROPERLY					
BREATH ALCOHOL ACCURACY STAND	ARDS				
✓ SIMULATOR SOLUTION ☐ COMPRESSED ETHANOL-GAS MIXTURE					
✓ STANDARD SUPPLIER Guth Labora	tories L	OT # 23390 ·	EXP. DATE 10/17/	2025	
☑ SIMULATOR TEMPERATURE (34°C ±	0.2°C) 34.00 SII	м. snMP231	9 SIM. NIST EX	P DATE 01/13/2026	
Run three tests using a standard solutiless. Check the box corresponding to the control of the c	ne standard solution being D BETWEEN 0.095% and D BETWEEN 0.076% and	ı used. (PRINTOUT A d 0.105% INCLUSIVE d 0.084% INCLUSIVE	ATTACHED) E E		
TEST 1 • 0.100	TEST 2 ☞ 0.101		TEST 3 ▼ 0.100		
☑ RFI DETECTOR OPERATING		ā			
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) 0	(.1014) 0	(.1519) 0	(OVER .19) 0	
List any new parts and describe any altera established limits (use other side if necessa		vas made to restore	the instrument to opera	ate satisfactorily and within	
INSPECTING OFFICER			757A01 WAR 1170 WAR		
SIGNATURE (WWX KWh)			Trooper C. R. Knox		
TYPE II PERMIT NUMBER/EXPIRATION DATE Permit #240025, Expires 01/26/2026			TELEPHONE NUMBER (636) 300-2800		
Return completed report to the: Breath	Alcohol Program, MO De I, fax, or email.	partment of Health ar		utheast District Office	

AS IV Serial no: 111648
Version no: 532B

TEST RECORD 00569

Year Date Time 210L

Air Blank:
02/04/25 21:04 .000
Calibration Check:
23 02/04/25 21:04 .100

Subject Name
Maint
Subject I.D.

Operator Name, I.D.

Cr Khox 24005
Location
Troop C HG

AS IV Serial no: 111648
Version no: 532B

TEST RECORD 00570

Temp Date Time 210L

Air Blank:
02/04/25 21:07 .000
Calibration Check:
24 02/04/25 21:07 .101

Subject Name
Majht
Subject I.B.

Operator Name, I.B.
C. Y-hox 240015
Location
Troop C HO

AS IV Serial no: 111648
Version no: 532B

TEST RECORD 00571

Jemp Date Time 210L

Air Blank: 02/04/25 21:10 .000
Calibration Check: 24 02/04/25 21:10 .100

Subject Name

Mg.ht

Subject I.D.

Operator Name, I.D.

C. Khox 240025
Location

Troop C HQ

AS IV Serial no: 111648
Version no: 532B

TEST RECORD 00572

Sy
Temp Date Time 210L

VOID: RFI
12 02/04/25 21:12

Subject Name

MG/MJ

Subject I.D.

Operator Name, I.D.

C, KAOX J4 00 J5

Location

Troop C J Q



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



CLAY KNOX

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

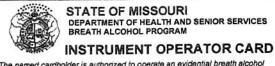
ALCO-SENSOR IV WITH PRINTER, INTOX DMT

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections

577.020 t	hrough 577.041, RSMo and 306.111 through 306.119 RSMo	Mike Massur
DATE	1/26/2024	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER	240025	Daves J. Michelson
EXPIRES	1/26/2026	DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)



The named cardholder is authonzed to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired ai in Missouri.

Operator KNOX, CLAY Permit No 240025

Date Issued 1/26/2024

Date Expires 1/26/2026

