By Tracy Crews at 1:42 pm, Feb 03, 2025



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

REPORT #7

Valley Va				
Complete this report in duplicate at the time of Send copy to Department of Health and Senior	of the regular monthly or Services; retain orig	preventative maintena ginal in department file.	nce check, and whe	never instrument is repaired.
ALCO SENSOR IV SN 111773	NAME OF AGENCY Missouri Stat	e Highway Patrol		OF INSPECTION 1/2025
LOCATION OF INSTRUMENT (STREET AND CITY) 3131 E Kearney, Springfield, Missouri 65803			TIME 10:3	OF INSPECTION 35
CHECKLIST: Place a mark in the box by each where determined.) Unmarked items must be			within established lin	nits. (Write in observed values
DIGITAL READOUT (ALL ELEMENTS O	PERATIONAL)			
TEMPERATURE OF ALCO SENSOR (10°C - 40°C)				
PRINTER WORKING PROPERLY				
▼ TIME AND DATE DISPLAYING PROPERLY				
BREATH ALCOHOL ACCURACY STANDAR	RDS			
SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE				
STANDARD SUPPLIER Guth Labora	tories, INC	LOT # 24310	EXP. DATE	
SIMULATOR TEMPERATURE (34°C ± 0	0.2°C) 33.99 s	SIM. SN MP2418	SIM. NIST	EXP DATE 12/04/2025
less. Check the box corresponding to the 0.100% STANDARD - MUST READ 0.080% STANDARD - MUST READ 0.040% STANDARD - MUST READ	BETWEEN 0.095% a BETWEEN 0.076% a	ind 0.105% INCLUSIVI and 0.084% INCLUSIVI	E E	
TEST 1099	TEST 2 ▼ .099		TEST 3 - .098	,
▼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 (004)	(.0509)	(.1014) 1	(.1519)	(OVER .19)
List any new parts and describe any alteration established limits (use other side if necessare change	у).			
INSPECTING OFFICER SIGNATURE # 727 TYPE II PERMIT NUMBER/EXPIRATION DATE 240144 Expires 6/28/2026		3/2026	PRINT NAME D W Henley #727 TELEPHONE NUMBER (417) 895- 6868	
Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office by mail, fax, or email.				

AS IV Serial no: 111773 Version no: 532B

210L 01/31/25 10:39 .000 TEST RECORD 00260 Time Date Air Blank: Temp

Subject Name 7£ST \$ Subject I.D.

Calibration Check: 19 01/31/25 10:39 .099

E KEARNEY O WHENEY #727 Operator Name, I.D. Location 33) SORTHGETELD, MO Ter# 7 /

AS IV Serial no: 111773 Version no: 532B

AS IV Serial no: 111773 Version no: 532B

TEST RECORD 00262

TEST RECORD - REPRINT

Time 210L TEST RECORD 00261 Date

01/31/25 10:40 ,000 Air Blank:

Calibration Check: -19 01/31/25 10:40 .099

JEST 2 Subject Name Subject I.D.

O W HENEY #727 Deerator Name, I.D. Locat ion

3131 E KENDUEY

HENIEY #727

Operator Name, I.D.

KERRAKY

313) F Locat ion 3

> Sparnefield My (2/# /D)

Speingfield mo

167#7/

AS IV Serial no: 111773 Version no: 532B

Time 210L

Temp Date

Air Blank: 01/31/25 10:42 .000 Calibration Check: 21 01/31/25 10:42 .098

Subject Name

TEST 3 Subject I.D.

210L TEST RECORD 00263 Temp Date Time UOID: RFI 12 01/31/25 10:44

Subject Name

Subject I.D. RFI

HENEY#727 KEARLY Operator Name, I.D. 3131 £ N N Location

SDRINGFIFUD, MA

87#18



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:

1

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

DAVID W. HENLEY, JR.

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

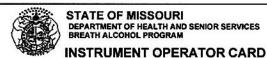
ALCO-SENSOR IV WITH PRINTER, INTOX DMT

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.

DATE6/28/2024	Mile Mason
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 240144	Daves I. nichelson
EXPIRES 6/28/2026	DIRECTOR OF DEPARTMENT OF HEALTH AND 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 air

Operator HENLEY, JR., DAVID

Permit No 240144

Date Issued 6/28/2024 Date Expires 6/28/2026

