

By Tracy Crews at 10:09 am, Mar 06, 2025



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 Seni	of the regular monthly previor Services; retain original i	entative maintena n department file.	nce check, and when	never instrument is repaired.	
ALCO SENSOR IV SN 119730	NAME OF AGENCY Palmyra Police Depa	artment		OF INSPECTION 6/2025	
LOCATION OF INSTRUMENT (STREET AND CITY) 200 N. Main St. Palmyra Mo. 63461			TIME 0	OF INSPECTION	
CHECKLIST: Place a mark in the box by each where determined.) Unmarked items must be	item if found to be satisfacte corrected before using inst	ory or if operating	within established lim	its. (Write in observed values	
DIGITAL READOUT (ALL ELEMENTS O					
☑ TEMPERATURE OF ALCO SENSOR (10°C - 40°C)					
PRINTER WORKING PROPERLY					
☑ TIME AND DATE DISPLAYING PROPER					
BREATH ALCOHOL ACCURACY STANDAR	RDS				
SIMULATOR SOLUTION COMPRESSED ETHANOL-GAS MIXTURE					
STANDARD SUPPLIER Guth Laboratories LOT # 24110 EXP. DATE 03/05/2028					
☑ SIMULATOR TEMPERATURE (34°C ± 0	.2°C)34.0 SIM. S	N DR5308	SIM. NIST E	XP DATE 07/23/2025	
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% and 0.1 BETWEEN 0.076% and 0.0	105% INCLUSIVE 084% INCLUSIVE			
TEST 1 ■ .096	TEST 2 🖛 .097		TEST 3 🕶 .097		
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		014) 0	(.1519) 0	(OVER .19) 1	
List any new parts and describe any alteratic established limits (use other side if necessary	on or modification that was	made to restore t	he instrument to ope	rate satisfactorily and within	
INSPECTING OFFICER					
· pheheal I bales			PRINT NAME Michael L. Baker		
TYPE II PERMIT NUMBER/EXPIRATION DATE 250020/02/21/2027			ELEPHONE NUMBER (573) 769-5540		
Return completed report to the: Breath Albumail, fa	cohol Program, MO Departr ax, or email.	nent of Health an	d Senior Services, Sc	outheast District Office	

AS IV Serial no: 119730
Version no: 532C

TEST RECORD 00233

Temp Date Time 210L

Air Blank: 03/06/25 08:33 .000
Calibration Check: 20 03/06/25 08:33 .096

Subject Name
Lelibration Check
Subject I.D.
Michael Baker
Operator Name, I.D.
Palmyra P.D.
Location

AS IV Serial no: 119730
Version no: 532C

TEST RECORD 00236

Jemp Date Time 210L

Air Blank: 03/06/25 08:39 .000
Calibration Check: 21 03/06/25 08:39 .097

Subject Name
Calibration Check
Subject I.D.
Michael Baker
Operator Name, I.D.
falmyra P.P.
Location

AS IV Serial no: 119730
Version no: 532C

TEST RECORD 00234

Temp Date Time 210L

Air Blank: 03/06/25 08:35 .000
Calibration Check: 20 03/06/25 08:35 .097

Subject Name
Calibration Check
Subject I.D.

Michael Baker
Operator Name. I.D.
Calmyra P.D.
Location

AS IV Serial no: 119730
Version no: 532C

TEST RECORD 00237

Temp Date Time 210L
VOID: RFI
12 03/08/25 08:40

Subject Name
RFT Check
Subject I.D.
Michael Baker
Operator Name, I.D.
Palmyra, P.P.
Location



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 24110 Alcohol Reference Solution for Simulator were analyzed by chromatography on March 6, 2024, using a Perkin Elmer Gas 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

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

MICHAEL L. BAKER

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 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE2/21/2025	adam Huti		
	DIRECTOR STATE PUBLIC HEALTH LABORATORY		
NUMBER 250020	0		
EXPIRES 2/21/2027	Sarah Willson, acting director		
	DIRECTOR OF DEPARTMENT OF HEALTH AND GENUGE		

MO 580-0771 (6-10)

LAB-4 (R6-10)

