



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
 STATE PUBLIC HEALTH LABORATORY
 BREATH ALCOHOL PROGRAM
DATAMASTER MAINTENANCE REPORT

RECEIVED
 By Carol Day at 3:54 pm, May 05, 2014

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).
 Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.
 Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

DATAMASTER SN 201083	NAME OF AGENCY Boone Co. S.O.	DATE OF INSPECTION 05/03/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 2121 COUNTY DR. COLUMBIA		TIME OF INSPECTION 14:23

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.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) 14:23
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 49 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER **Guth Laboratories** LOT # **13100** EXP. DATE **04/23/2015**

SIMULATOR TEMP (34°C ± 0.2°C) **34.0** °C SIMULATOR SN **SD2218** EXP. DATE **02/18/2015**

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. Mark 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 • .099	TEST 2 • .099	TEST 3 • .100
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PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS 0	(0-.04) 2	(.05-.09) 4	(.10-.14) 2	(.15-.19) 7	OVER .19 0
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY).

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME DOMENICA P. ANTONI
TYPE II PERMIT NUMBER/EXPIRATION DATE 220294 / 09/25/2014	TELEPHONE NUMBER 573-875-1111

RETURN COMPLETED REPORT TO THE:
 Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
 2875 James Blvd.
 Poplar Bluff, MO 63901

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
BAC DATAMASTER SERIAL NUMBER 201083
05/03/14
14:23

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM (04-07-2009): OKAY
HEATERS: 49C
SAMPLE CHAMBER: OKAY
FLOW DETECTOR: OKAY
PUMP: OKAY
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST
! " # \$ % ' () * + , - . / 0 1 2 3 4 5 6 7 8 9 : ; < = > ? @ A B C D E F G
H I J K L M N O P Q R S T U V W X Y Z [\] ^ _ ` a b c d e f g h i j k l m n o
p q r s t u v w x y z { | } ~

Operator Signature 

2208-02

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
BAC DATAMASTER SERIAL NUMBER 201083
05/03/14

TESTING OFFICER:

ANTIMI/NIKKI

OFFICER I.D.: 5283

PERMIT NUMBER: 220294

EXPIRATION DATE: 09/25/14

MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST .000 14:26
INTERNAL STANDARD VERIFIED 14:26
EXTERNAL STANDARD .099 14:26
BLANK TEST .000 14:27
EXTERNAL STANDARD .099 14:28
BLANK TEST .000 14:28
EXTERNAL STANDARD .100 14:29
BLANK TEST .000 14:29

N = 3

SIM. = .1

AVG. = .0993

Operator Signature 

2208-02

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
BAC DATAMASTER SERIAL NUMBER 201083
05/03/14

ARREST TIME: 13:00

SUBJECT NAME:

TEST/RFI

DOB: 01/01/10 SEX: F

STATE/D.L.: MO/123456

ARRESTING OFFICER:

ANTIMI/N

OFFICER I.D.: 5283

TESTING OFFICER:

ANTIMI/N

OFFICER I.D.: 5283

PERMIT NUMBER: 220294

EXPIRATION DATE: 09/25/14

MISCELLANEOUS DATA:

RFI TEST

--- BREATH ANALYSIS ---

RADIO INTERFERENCE

Operator Signature 

2208-02



Bottle # 534

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13100 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on April 29, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1214% (w/vol) ethyl alcohol. The expiration date for this lot number is April 23, 2015 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- 0.2°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 FN122211-02 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



PERMIT
TYPE II



DOMENICA P ANTIMI

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

DATAMASTER; ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 09/25/2012
Number 220294
Expires 09/25/2014

Director of State Public Health Laboratory

Director, Department of Health