



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

REPORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days) or
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.

RECEIVED
By Carol Day at 11:35 am, Jan 16, 2014

| | | |
|-------------------------|--|----------------------------------|
| DATAMASTER SN 201208 | NAME OF AGENCY Desoto Police Department | DATE OF INSPECTION 01/13/2014 |
|-------------------------|--|----------------------------------|

| | |
|--|-------------------------------|
| LOCATION OF INSTRUMENT (STREET AND CITY) 17 Boyd Desoto, MO 63020 (Booking) | TIME OF INSPECTION 5:38 am |
|--|-------------------------------|

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) 01-13-2014 06:38 |
| <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 Labs LOT # 13210 EXP. DATE 07/29/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD2750 EXP. DATE 10/07/2014

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 → .102 | TEST 2 → .102 | TEST 3 → .102 |
|---------------|---------------|---------------|

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) | 3 | (.05-.09) | 0 | (.10-.14) | 1 | (.15-.19) | 0 | OVER .19 | 0 |
|----------|---|----------|---|-----------|---|-----------|---|-----------|---|----------|---|

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 <i>Daniel Scott Snodgrass</i> | PRINT FULL NAME Daniel Scott Snodgrass |
| TYPE II PERMIT NUMBER/EXPIRATION DATE 220142 06/12/2014 | TELEPHONE NUMBER (636) 586-8891 |

RETURN COMPLETE REPORT TO THE:
Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2876 James Blvd.
Poplar Bluff, MO 63901



GUTH LABORATORIES, INC.

690 NORTH 87th STREET • HARRISBURG, PA 17111-4811 • TELEPHONE: 717-664-6470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13210 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on July 31, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1216% (w/vol) ethyl alcohol. The expiration date for this lot number is July 29, 2015 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 FNI22211-02 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.

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
DESOTO POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201208
01/13/14

TESTING OFFICER:

SNODGRASS/DANIEL/SCOTT
OFFICER I.D.: 607
PERMIT NUMBER: 220142
EXPIRATION DATE: 06/12/14 - 06-12-2014
MISCELLANEOUS DATA: *Pe Snodgrass 607*

--- SUPERVISOR MODE ---

| | | |
|-------------------|----------|-------|
| BLANK TEST | .000 | 05:40 |
| INTERNAL STANDARD | VERIFIED | 05:41 |
| EXTERNAL STANDARD | .102 | 05:41 |
| BLANK TEST | .000 | 05:42 |
| EXTERNAL STANDARD | .102 | 05:42 |
| BLANK TEST | .000 | 05:43 |
| EXTERNAL STANDARD | .102 | 05:43 |
| BLANK TEST | .000 | 05:44 |

N = 3
SIN. = .1
AVG. = .102

Operator Signature

Pe Snodgrass 607 Type II

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
DESOTO POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201208
01/13/14
05:39

--- DIAGNOSTIC CHECK ---

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

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEF0
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmnopqrstuvwxyz{|}~"

Operator Signature

Pe Snodgrass 607 Type II

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
DESOTO POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201208
01/13/14

ARREST TIME: 03:00
SUBJECT NAME:
RFI/CHECK
DOB: 01/01/80 SEX: M
STATE/D.L.: MO/NA
ARRESTING OFFICER:
NA
OFFICER I.D.: 000
TESTING OFFICER:
SNODGRASS/DANIEL/SCOTT
OFFICER I.D.: 607
PERMIT NUMBER: 220142
EXPIRATION DATE: 06/12/14
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 05:46
INTERNAL STANDARD VERIFIED 05:46
RADIO INTERFERENCE

Operator Signature

Po. Daniel 607 Type II

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
DESOTO POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201208
01/13/14

ARREST TIME: 03:00
SUBJECT NAME:
SELF/TEST
DOB: 01/01/80 SEX: M
STATE/D.L.: MO/NA
ARRESTING OFFICER:
NA
OFFICER I.D.: 000
TESTING OFFICER:
SNODGRASS/DANIEL/SCOTT
OFFICER I.D.: 607
PERMIT NUMBER: 220142
EXPIRATION DATE: 06/12/14
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 05:50
INTERNAL STANDARD VERIFIED 05:50
SUBJECT SAMPLE .000 05:51
BLANK TEST .000 05:51

Operator Signature

Po. Daniel 607 Type II

2208-02

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



DANIEL SCOTT SNODGRASS

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

DATAMASTER

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 06/12/2012

Number 220142

Expires 06/12/2014

MO 600-0771 (7-80)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)