



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

**RECEIVED**  
 By Carol Day at 2:21 pm, Sep 16, 2014

REPORT #6

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 #201217	NAME OF AGENCY Crystal City Police Department	DATE OF INSPECTION 09/16/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 130 Mississippi Avenue, Crystal City		TIME OF INSPECTION 6:25 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) 09/16/2014 06:47
<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, Inc. LOT # 14200 EXP. DATE 08/05/2016

SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN DR3772 EXP. DATE 04/30/2015

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 <input checked="" type="checkbox"/> .100	TEST 2 <input checked="" type="checkbox"/> .099	TEST 3 <input checked="" type="checkbox"/> .099
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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)	0	(.05-.09)	0	(.10-.14)	1	(.15-.19)	1	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 <i>[Signature]</i>	PRINT FULL NAME Sgt. Jeffery S. Wynn, DSN-204
TYPE IF PERMIT NUMBER/EXPIRATION DATE 240141 04/03/2016	TELEPHONE NUMBER (636) 937-4601

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

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
CRYSTAL CITY POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201217  
05/16/14  
05147

--- 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:;<=>?@ABCDEFGHIJ  
KLMNOPQRSTUVWXYZ[\]^\_`abcdefgijklmnop  
qrsstuvwxyz{|}~

Operator Signature

*[Signature]* #204 Type II

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
CRYSTAL CITY POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201217  
05/16/14

TESTING OFFICER:

RYAN JEFFERY/S

OFFICER I.D.: 204

PERMIT NUMBER: 240141

EXPIRATION DATE: 04/02/16

MISCELLANEOUS DATA:

--- SUPERVISOR NOTE ---

BLANK TEST .000 05:51  
INTERNAL STANDARD VERIFIED 05:52  
EXTERNAL STANDARD .100 06:50  
BLANK TEST .000 06:50  
EXTERNAL STANDARD .099 06:51  
BLANK TEST .000 06:51  
EXTERNAL STANDARD .099 06:51  
BLANK TEST .000 06:51

N = 3

SIM. = .1

AVG. = .0993

Operator Signature

*[Signature]* #204 Type II

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
CRYSTAL CITY POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201217  
09/16/14

ARREST TIME: 06:13

SUBJECT NAME:

TEST/RFI

DOR: 01/02/34 SEX: F

STATE/D.L.: MO/A123456789

ARRESTING OFFICER:

WYNN/JEFFERY/S

OFFICER I.D.: 204

TESTING OFFICER:

WYNN/JEFFERY/S

OFFICER I.D.: 204

PERMIT NUMBER: 2A0141

EXPIRATION DATE: 04/03/16

MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	06:59
INTERNAL STANDARD	VERIFIED	06:59
RADIO INTERFERENCE		

Operator Signature

*[Handwritten Signature]* #204 Type II



## GUTH LABORATORIES, INC.

690 NORTH 6TH STREET • HARRISBURG, PA 17111-4811 • TELEPHONE: 717-564-5470

### CERTIFICATE OF ANALYSIS

#### Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14200 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on August 6, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1213% (w/vol) ethyl alcohol. The expiration date for this lot number is August 5, 2016 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 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 AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM



**PERMIT  
TYPE II**

**JEFFERY S WYNN**

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

**DATAMASTER**

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.

DATE 4/3/2014

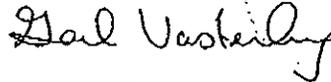
NUMBER 240141

EXPIRES 4/3/2016

MO 580-0771 (8-10)



DIRECTOR OF STATE PUBLIC HEALTH LABORATORY



DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (PG-10)

 STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

**INSTRUMENT OPERATOR CARD**

*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 in Missouri.*



Operator WYNN, JEFFERY  
Permit No 240141  
Date issued 4/3/2014 Date Expires 4/3/2016