



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

**RECEIVED**  
 By Carol Day at 1:45 pm, Nov 13, 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 201221	NAME OF AGENCY Moberly Police Department	DATE OF INSPECTION 11/11/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 300 N Clark St. Moberly, Mo 65270		TIME OF INSPECTION 6:36 pm

**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) 11/11/2014 18:44
<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

<input checked="" type="checkbox"/> INDICATOR LIGHTS
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER <u>Guth Laboratories</u> LOT # <u>14030</u> EXP. DATE <u>01/20/2016</u>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34.0</u> °C SIMULATOR SN <u>SD1500</u> EXP. DATE <u>9-4-15</u>

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 • .100	TEST 2 • .102	TEST 3 • .102
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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)	2	(.10-.14)	1	(.15-.19)	3	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).

N/A

<b>INSPECTING OFFICER</b>	
SIGNATURE <i>M. C. Hollis</i>	PRINT FULL NAME M. C. Hollis
TYPE II PERMIT NUMBER/EXPIRATION DATE 220123 03/24/2016	TELEPHONE NUMBER (660) 263-0346

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

BAC DATAMASTER SERIAL NUMBER 201221  
11/11/14

TESTING OFFICER:  
HOLLIS/M/C  
OFFICER I.D.: 234  
PERMIT NUMBER: 240123  
EXPIRATION DATE: 03/24/16  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	18:40
INTERNAL STANDARD	VERIFIED	18:40
EXTERNAL STANDARD	.100	18:41
BLANK TEST	.000	18:41
EXTERNAL STANDARD	.102	18:42
BLANK TEST	.000	18:43
EXTERNAL STANDARD	.102	18:43
BLANK TEST	.000	18:44

N = 3  
SIM. = .099  
AVG. = .1013

Operator Signature

*Michael C Hollis*

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI

BAC DATAMASTER SERIAL NUMBER 201221  
11/11/14  
18:44

--- 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[\]^\_`abcdefghijklmnopqr  
stuvwxyz{|}~

Operator Signature

*Michael C Hollis*

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI

BAC DATAMASTER SERIAL NUMBER 201221  
11/11/14

ARREST TIME: 18:01  
SUBJECT NAME:  
RFI/TEST  
DOB: 01/01/01 SEX: M  
STATE/D.L.: MO/  
ARRESTING OFFICER:  
NA  
OFFICER I.D.:  
TESTING OFFICER:  
HOLLIS/M/C  
OFFICER I.D.: 23  
PERMIT NUMBER: 240123  
EXPIRATION DATE: 03/24/16  
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

RADIO INTERFERENCE

Operator Signature

*Michael C Hollis*

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI

BAC DATAMASTER SERIAL NUMBER 201221  
11/11/14

ARREST TIME: 18:01  
SUBJECT NAME:  
BLANK/TEST  
DOB: 01/11/11 SEX: M  
STATE/D.L.: MO/  
ARRESTING OFFICER:  
NA  
OFFICER I.D.:  
TESTING OFFICER:  
HOLLIS/M/C  
OFFICER I.D.: 234  
PERMIT NUMBER: 240123  
EXPIRATION DATE: 03/24/16  
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	18:36
INTERNAL STANDARD	VERIFIED	18:36
SUBJECT SAMPLE	.000	18:38
BLANK TEST	.000	18:39

Operator Signature

*Michael C Hollis*



**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

**CERTIFICATE OF ANALYSIS**

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14030 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 22, 2014, using a Perkin Elmer 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 January 20, 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.*