



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

RECEIVED
 By Carol Day at 12:04 pm, Feb 04, 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 201229	NAME OF AGENCY St Robert Police Department	DATE OF INSPECTION 01/23/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 194 Eastlawn Ave Ste A St Robert, MO 65584		TIME OF INSPECTION 10:32 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) 01-23-14/22:32
<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 SD2284 EXP. DATE 07/10/2014

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 0.098%	TEST 2 0.099%	TEST 3 0.099%
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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	3	(0-.04)	1	(.05-.09)	2	(.10-.14)	1	(.15-.19)	0	OVER .19	1
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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).

Instrument is operating within requirements of Missouri DHSS

INSPECTING OFFICER	
SIGNATURE 	PRINT FULL NAME Jennifer R Janko
TYPE / PERMIT NUMBER / EXPIRATION DATE 220078 / 03/23/2014	TELEPHONE NUMBER (573) 336-4700

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

**GUTH LABORATORIES, INC.**

590 NORTH 67th STREET • HARRISBURG, PA 17111-4811 • TELEPHONE: 717-664-6470

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 +/- .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.

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI

BAC DATAMASTER SERIAL NUMBER 201229

01/23/14
22:32

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HERTERS
SAMPLE CHREBER: 48c

FLOW DETECTOR: OKAY

PUMP
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

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

Operator Signature

[Signature]

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI

BAC DATAMASTER SERIAL NUMBER 201229

01/23/14

TESTING OFFICER:

JANKO/JENNIFER/R

OFFICER I.D.: 103

PERMIT NUMBER: 220079

EXPIRATION DATE: 03/23/14

MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST .000 22:34

INTERNAL STANDARD VERIFIED 22:34

EXTERNAL STANDARD .098 22:35

BLANK TEST .000 22:35

EXTERNAL STANDARD .099 22:36

BLANK TEST .000 22:36

EXTERNAL STANDARD .099 22:37

BLANK TEST .000 22:37

N = 3

SIM. = .098

AVG. = .0986

Operator Signature

[Signature]

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI

BAC DATA MASTER SERIAL NUMBER 201229
01/23/14

ARREST TIME: 00:00
SUBJECT NAME:
RFI/CHECK
DOB: 01/01/01 SEX: F
STATE/D.L.: NA/NONE
ARRESTING OFFICER:
NH
OFFICER I.D.: 000
TESTING OFFICER:
JRNKD/JENNIFER/R
OFFICER I.D.: 103
PERMIT NUMBER: 220078
EXPIRATION DATE: 03/23/14
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 22:39
INTERNAL STANDARD VERIFIED
RADIO INTERFERENCE 22:39

Operator Signature MM 103

State of Missouri
DEPARTMENT OF HEALTH

PERMIT
TYPE II



JENNIFER R JANKO

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 577.041, RSMo 1986.

Date 03/23/2012

Number 220078

Expires 03/23/2014

MO 589-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)