



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

RECEIVED
By Carol Day at 1:36 pm, Apr 01, 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 201231	NAME OF AGENCY Thayer Police Dept.	DATE OF INSPECTION 03/29/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 102 Front St. Thayer, Mo 65791 Thayer Police Dept.		TIME OF INSPECTION 12:19 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) 03/29/2014 12:19
<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 Lab</u>	LOT # <u>13010</u> EXP. DATE <u>01/09/2015</u>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) _____ 34 _____ °C	SIMULATOR SN _____ SD2301 EXP. DATE <u>03/12/2015</u>
<input checked="" type="checkbox"/> 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)	
<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE	
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE	
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE	

TEST 1 \Rightarrow .102	TEST 2 \Rightarrow .102	TEST 3 \Rightarrow .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)

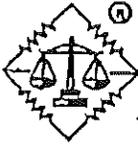
REFUSALS 2	(0-.04) _____	(.05-.09) _____	(.10-.14) 2	(.15-.19) _____	OVER .19 _____
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE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

INSPECTING OFFICER

SIGNATURE <i>Sgt. J. A. Martin - 4094</i>	PRINT FULL NAME Sgt. James A. Martin 4094
TYPE II PERMIT NUMBER/EXPIRATION DATE 230328 12/23/2015	TELEPHONE NUMBER (417) 264-3819

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.**

800 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-504-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13010 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 14, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1218% (w/vol) ethyl alcohol. The expiration date for this lot number is January 9, 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 201231
03/29/14

ARREST TIME: 12:00
SUBJECT NAME:
MASTER/DATA
DOB: 12/31/00 SEX: M
STATE/D.L.: MO/012345
ARRESTING OFFICER:
MARTIN/JAMES
OFFICER I.D.: 4094
TESTING OFFICER:
MARTIN/JAMES
OFFICER I.D.: 4094
PERMIT NUMBER: 230328
EXPIRATION DATE: 12/25/15
MISCELLANEOUS DATA:
R.F.I TEST
R.F.I TEST

--- BREATH ANALYSIS ---

BLANK TEST .000 12:29
INTERNAL STANDARD VERIFIED 12:29
RADIO INTERFERENCE

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
BAC DATAMASTER SERIAL NUMBER 201231
03/29/14

TESTING OFFICER:
MARTIN/JAMES/A
OFFICER I.D.: 4094
PERMIT NUMBER: 230328
EXPIRATION DATE: 12/25/15
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST .000 12:20
INTERNAL STANDARD VERIFIED 12:22
EXTERNAL STANDARD .102 12:22
BLANK TEST .000 12:23
EXTERNAL STANDARD .102 12:24
BLANK TEST .000 12:24
EXTERNAL STANDARD .102 12:25
BLANK TEST .000 12:26

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

Signature Sgt. J. A. Martin

Operator Signature Sgt. J. A. Martin

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
BAC DATAMASTER SERIAL NUMBER 261831
03/29/14
12:19

--- 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

! " # \$ % & ' () * + , - . / 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 { | } ~ * " ' , - . / : ; < = > ? @ A B C D E F G

Operator Signature Sgt. J. A. [Signature]



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

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PERMIT
TYPE II

JAMES A MARTIN

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repair 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 section 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 12/23/2013

NUMBER 230328

EXPIRES 12/23/2015

MO 580-0771 (8-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R0)



Missouri Department of Health and Senior Services
P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010
RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466
Margaret T. Donnelly
Director



Jeremiah W. (Jay) Nixon
Governor

Missouri Department of Health and Senior Services Breath Alcohol Program

SIMULATOR CALIBRATION REPORT

This is to certify that the simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance to the standards set by the Rules of Missouri Department of Health and Senior Services, 19 CSR 25-30.

SIMULATOR INFORMATION

Agency: Thayer Police Department
Serial Number: SD 2301
Manufacturer: Guth
Model Number: 10-4D

CALIBRATION RESULTS

Table with 2 columns: Reference Temperature, Simulator Temperature. Values: 34.00, 34.0

This calibration was performed with NIST-Traceable Thermometer SN: 304447

This calibration was performed by: Brian M. Lutmer

This calibration was performed: 03/12/2014

COPY OF CALIBRATION STICKER

Calibration sticker containing DHSS logo, simulator serial number (SD2301), expiration date (03/12/2015), and other calibration details.