



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

RECEIVED
 By Carol Day at 11:54 am, Oct 15, 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 201232	NAME OF AGENCY Salem Police Department	DATE OF INSPECTION 10/06/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 500 North Jackson Street, Salem 65560		TIME OF INSPECTION 11:50 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) <u>10/06/2014 23:50</u>
<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 <u>49</u> °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 # 14200 EXP. DATE 08/05/2016

SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD2774 EXP. DATE 06/04/2015

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 <u>.095</u>	TEST 2 <u>.097</u>	TEST 3 <u>.097</u>
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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)	0	(.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).

INSPECTING OFFICER

SIGNATURE <i>Robert T. Simpson #105</i>	PRINT FULL NAME Robert T. Simpson
TYPE II PERMIT NUMBER/EXPIRATION DATE 240340 09/22/2016	TELEPHONE NUMBER (573) 729-4242

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 17111-4511 • TELEPHONE: 717-664-5470

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 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.

Face This Side Down - This Edge In First

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
SHELBY POLICE DEPARTMENT

FIELD OPERATOR SERIAL NUMBER 201202
12/05/14

--- LINE OPERATOR ---
OPERATOR NUMBER: 201202
SERIAL NUMBER: 201202
DATE: 12/05/14
TIME: 10:00:00

--- OPERATOR SIDE ---

ALCOHOL TEST	000	03:53
DRUG TEST	000	03:53
TOXIC TEST	000	03:53
OTHER TEST	000	03:53

Operator Signature

[Signature] #05

Face This Side Down - This Edge In First

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
SHELBY POLICE DEPARTMENT

FIELD OPERATOR SERIAL NUMBER 201202
12/05/14

--- LABORATORY CHECK ---

OPERATOR: 201202
SERIAL: 201202
DATE: 12/05/14
TIME: 10:00:00

OPERATOR: 201202

LABORATORY: 201202

TOXIC: 201202

OTHER: 201202

OTHER: 201202

OTHER: 201202

OTHER: 201202

OTHER: 201202

PRINTER TEST
ABCDEFGHIJKLMNOPQRSTUVWXYZ
0123456789ABCDEF
GHIJKLMNOPQRSTUVWXYZ
0123456789

Operator Signature

[Signature] #05

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
SHELBY POLICE DEPARTMENT

ANALYST: [REDACTED] SERIAL NUMBER: 281282
10/06/14

REQUEST TYPE: 23120
SUBJECT TYPE: 011

DOB: [REDACTED] SEX: M
SPOUSE: [REDACTED]
SUSPECT OFFICER: [REDACTED]

APPROVAL: [REDACTED]
ISSUING OFFICER: [REDACTED]

LABORATORY: [REDACTED]
LABOR NUMBER: 242242
EXPIRATION DATE: 08/22/18
MISPLACED TRUST: 0115
011
021

--- SHELBY ANALYSIS ---

ANALYST: [REDACTED] 23158
COLLECTOR: [REDACTED] VERIFIED: 23158
ANALYST: [REDACTED]

Operator Signature

[Handwritten Signature]



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

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**PERMIT
 TYPE II**

ROBERT T SIMPSON

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.

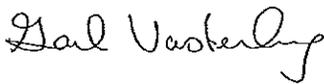
DATE 9/22/2014

NUMBER 240340

EXPIRES 9/22/2016



 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY



 ,acting director
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES