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

DATAMASTER MAINTENANCE REPORT

RECEIVED 1/21/14-CD

REPORT #6

REVIEWED
By Carol Day at 1:38 pm, Apr 03, 2014

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed [illegible]). 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	NAME OF AGENCY	DATE OF INSPECTION
201234	Greene County Sheriff's Office	01/14/2014

LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION
Greene County Jail 1000 North Boonville Avenue, Springfield, MO 65802	1:51 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.

- [x] DIAGNOSTIC CHECK (PRINTOUT ATTACHED) — DATE AND TIME (from printout) 01/14/2014 @ 1353 hours
  - [x] COMPUTER
  - [x] DETECTOR
  - [x] PROGRAM
  - [x] FILTERS
  - [x] HEATERS SAMPLE CHAMBER 49 °C
  - [x] QUARTZ STANDARD
  - [x] FLOW DETECTOR
  - [x] CALIBRATION
  - [x] PUMP HIGH SPEED
  - [x] PRINTER
- [x] INDICATOR LIGHTS
- [x] SIMULATOR SOLUTION SUPPLIER Guth Labs LOT # 13010 EXP. DATE 01/09/2015
- [x] SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD 2219 EXP. DATE 05/20/2014
- [x] 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)

- [x] 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 ☛	TEST 2 ☛	TEST 3 ☛
.097	.098	.099

- [x] 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-.04)	(.05-.09)	(.10-.14)	(.15-.19)	OVER .19
3	5	1	3	4	2

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	PRINT FULL NAME
▸ 707/230126	Christopher M. Sowards
TYPE II PERMIT NUMBER/EXPIRATION DATE	**TELEPHONE NUMBER**
230126 06/12/2015	(417) 868-4040

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

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
services provided on a nondiscrimatory basis

STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES

BREATH ALCOHOL PROGRAM

2

PERMIT

TYPE II

CHRISTOPHER M SOWARDS

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, ALCO-SENSOR IV W/PRINTER

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 **06/12/2013**

NUMBER **230126**

EXPIRES **06/12/2015**

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

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 **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
GREENE COUNTY SHERIFF'S DEPT

BAC DATAMASTER SERIAL NUMBER 201234
01/14/14
13:53

--- 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:;<=>?@ABCDEFG
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmno
pqrstuvwxyz{|}~

Operator Signature 707/230126

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
GREENE COUNTY SHERIFF'S DEPT

BAC DATAMASTER SERIAL NUMBER 201234
01/14/14

TESTING OFFICER:
SOWARDS/CHRISTOPHER/M
OFFICER I.D.: 707
PERMIT NUMBER: 230126
EXPIRATION DATE: 06/12/15
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	14:03
INTERNAL STANDARD	VERIFIED	14:03
EXTERNAL STANDARD	.097	14:03
BLANK TEST	.000	14:04
EXTERNAL STANDARD	.098	14:04
BLANK TEST	.000	14:05
EXTERNAL STANDARD	.099	14:06
BLANK TEST	.000	14:06

N = 3
SIM. = .1
AVG. = .098

Operator Signature 707/230126

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
GREENE COUNTY SHERIFF'S DEPT

BAC DATAMASTER SERIAL NUMBER 201234
01/14/14

ARREST TIME: 13:00
SUBJECT NAME:
RFI/BLANK
DOB: 11/11/11 SEX: M
STATE/D.L.: MO/A123456789
ARRESTING OFFICER:
SOWARDS/CHRISTOPHER/M
OFFICER I.D.: 707
TESTING OFFICER:
SOWARDS/CHRISTOPHER/M
OFFICER I.D.: 707
PERMIT NUMBER: 230126
EXPIRATION DATE: 06/12/15
MISCELLANEOUS DATA:
RFI CHECK/BLANK TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	14:10
INTERNAL STANDARD	VERIFIED	14:10
SUBJECT SAMPLE	.000	14:11
RADIO INTERFERENCE		

Operator Signature 707/230126

2208-02