



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

RECEIVED

By Carol Day at 10:56 am, May 28, 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 201240	NAME OF AGENCY Wayne County Sheriff's Department	DATE OF INSPECTION 05/27/2014
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LOCATION OF INSTRUMENT (STREET AND CITY) Piedmont Police Department 116 Green ST. Piedmont, MO 63957	TIME OF INSPECTION 8:48 pm
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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.

- DIAGNOSTIC CHECK (PRINTOUT ATTACHED) DATE AND TIME (from printout) _____
- COMPUTER DETECTOR
- PROGRAM FILTERS
- HEATERS SAMPLE CHAMBER _____ 49 °C QUARTZ STANDARD
- FLOW DETECTOR CALIBRATION
- PUMP HIGH SPEED PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER Guth Laboratories LOT # 13280 EXP. DATE 10/16/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN SD 2257 EXP. DATE 03/16/2015

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 → .100 %	TEST 2 → .100 %	TEST 3 → .101 %
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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	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).

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME Travis J E Hanger
TYPE II PERMIT NUMBER/EXPIRATION DATE 240094-03-11-2016	TELEPHONE NUMBER (573) 223-4300

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: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13280 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 18, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1217% (w/vol) ethyl alcohol. The expiration date for this lot number is October 16, 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 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
PIEDMONT POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 201240
05-27/14

ARREST TIME: 20:00
SUBJECT NAME:
TEST:

DOB: 01/31/61 SEX: M
STATE/D.L.#: MO/122254743
ARRESTING OFFICER:
HANGER/TRAVIS
OFFICER I.D.#: 339
TESTING OFFICER:
HANGER/TRAVIS/JE
OFFICER I.D.#: 339
PERMIT NUMBER: 240094
EXPIRATION DATE: 03/11/15
MISCELLANEOUS DATA:

--- BREATHER ANALYSIS ---

BLANK TEST .000 21:01
INTERNAL STANDARD VERIFIED 21:01
MIDIO INTERERENCE

Operator Signature *Travis Hanger*

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
PIEDMONT POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 201240
05-27/14

TESTING OFFICER:
HANGER/TRAVIS/JE
OFFICER I.D.#: 339
PERMIT NUMBER: 240094
EXPIRATION DATE: 03/11/15
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST .000 20:54
INTERNAL STANDARD VERIFIED 20:54
EXTERNAL STANDARD .100 20:55
BLANK TEST .000 20:55
EXTERNAL STANDARD .100 20:56
BLANK TEST .000 20:56
EXTERNAL STANDARD .101 20:57
BLANK TEST .000 20:57

N = 3
SIN. = .11
AVG. = .1003

Operator Signature *Travis Hanger*

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
PIEDMONT POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 201240
05-27/14
20:58

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROBLEMS (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 { | } ~ * ()

Operator Signature *Travis Hanger*



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



PERMIT
TYPE II

TRAVIS JF HANGER

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 3/11/2014

NUMBER 240094

EXPIRES 3/11/2016

MO-SPC-0371 (6-10)

W. S. [Signature]
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Shel Verbeke
 acting Director
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4-316-1 (D)