



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

RECEIVED 2/14/2014 REPORT #

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.

REVIEWED
 By Carol Day at 9:36 am, Mar 14, 2014

DATAMASTER SN 201245	NAME OF AGENCY Farmington Police Department	DATE OF INSPECTION 02/03/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 310 Ste. Genevieve Ave., Farmington		TIME OF INSPECTION 6:02 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) 02/03/2014 18:02
<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 48 °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, Inc. LOT # 13280 EXP. DATE 10/16/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN DR5387 EXP. DATE 01/09/2015

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 • .099	TEST 2 • .099	TEST 3 • .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	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	2	(.15-.19)	1	OVER .19	2
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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).

N/A

INSPECTING OFFICER

SIGNATURE <i>Lt. Larry Lacey</i>	PRINT FULL NAME Lt. Larry Lacey, 114
TYPE II PERMIT NUMBER/EXPIRATION DATE 220062 02/21/2014	TELEPHONE NUMBER (573) 756-6686

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 87th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-6470

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 $34^{\circ}\text{C} \pm 0.2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L $\pm 3\%$.

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.



P E R M I T
TYPE II



LARRY E LACEY

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 577.020 through 577.041, RSMo 1986.

Date 02/21/2012

Number 220062

Expires 02/21/2014

Director of State Public Health Laboratory

Director, Department of Health

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
FARMINGTON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201245
02/03/14

TESTING ON / OLEM
OFFICER / LINDY / F
OFFICER / J. B. / 114
PERMIT NUMBER / 200000
EXPIRATION DATE / 02/21/14
MISCELLANEOUS DATA

--- SUPERVISOR NAME ---

BLANK TEST	.000	18400
INTERNAL STANDARD	.001100	18400
EXTERNAL STANDARD	.000	18400
BLANK TEST	.000	18400
EXTERNAL STANDARD	.000	18400
BLANK TEST	.000	18400
EXTERNAL STANDARD	.000	18400
BLANK TEST	.000	18400

ST = 3
SUM = 3
AVG = .000

Operator Signature

Lt. Larry Pacey 114

2208-02

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
FARMINGTON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201245
02/03/14
18:02

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM (04-07-2009):	OKAY
HEATERS	
SAMPLE CHAMBER:	48c
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARDS:	OKAY
CALIBRATION:	OKAY

PRINTER TEST

!@#%&'()*+,-./0123456789:;<=>?@ABCDEFGHIJ
KLMNOPQRS TUVWXYZ[\]^_`abcde fghijklmno
pqrstuvwxyz{|}~"

Operator Signature

Lt. Larry Pacey 114

2208-02

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSISSIPPI
HARRISBURG POLICE DEPARTMENT
CHINA BAPTIST CHURCH AREA, ROOM 201
HARRISBURG, MISSISSIPPI

DATE: 11/14/99
TIME: 10:00 AM

OFFICER: [Name]
STATE POLICE OFFICER:
INVESTIGATOR:

OFFICER: [Name]
INVESTIGATOR:

OFFICER: [Name]
INVESTIGATOR:

OFFICER: [Name]
INVESTIGATOR:

OFFICER: [Name]
INVESTIGATOR:

Operator Signature

Lt. Larry Casey 114