



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

RECEIVED 1/18/14-CD **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.

REVIEWED
 By Carol Day at 9:37 am, Mar 14, 2014

DATAMASTER SN 201258	NAME OF AGENCY HIGGINSVILLE POLICE DEPARTMENT	DATE OF INSPECTION 01/21/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 1922 MAIN HIGGINSVILLE		TIME OF INSPECTION 6:15 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) 01/31/2014 18:49
<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

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER GUTH LABORATORIES LOT # 13210 EXP. DATE 07/28/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN SD2672 EXP. DATE 01/21/2015

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 .103	TEST 2 .104	TEST 3 .104
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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) 1	(.10-.14) 1	(.15-.19) 1	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).

BAC Datamaster operating within DOHSS Standards

INSPECTING OFFICER	
SIGNATURE 	PRINT FULL NAME Shawn Davenport
TYPE II PERMIT NUMBER/EXPIRATION DATE 230070 04/26/2015	TELEPHONE NUMBER (660) 584-2104

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.

690 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **13210** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **July 31, 2013**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1216%** (w/vol) ethyl alcohol. The expiration date for this lot number is **July 29, 2015** at 11:59 PM.

When used in a calibrated Simulator, operating at $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, 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.

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSISSIPPI
MISSISSIPPI POLICE DEPARTMENT

3800 MEMPHIS AVENUE, SUITE 1000, MEMPHIS, TENNESSEE 38119
901.527.1234

REPORT DATE: 08/21/2008
REPORT TIME: 10:00 AM
REPORTING OFFICER: [Faded]
OFFICER ID: [Faded]
OFFICER SIGNATURE: [Faded]
OFFICER TITLE: [Faded]
OFFICER AGENCY: [Faded]
OFFICER PHONE: [Faded]
OFFICER FAX: [Faded]
OFFICER EMAIL: [Faded]
OFFICER ADDRESS: [Faded]
OFFICER CITY: [Faded]
OFFICER STATE: [Faded]
OFFICER ZIP: [Faded]

REPORTING AGENCY: [Faded]
REPORTING AGENCY ADDRESS: [Faded]
REPORTING AGENCY CITY: [Faded]
REPORTING AGENCY STATE: [Faded]
REPORTING AGENCY ZIP: [Faded]

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MISSISSIPPI POLICE DEPARTMENT

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OFFICER CITY: [Faded]
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OFFICER ZIP: [Faded]

REPORTING AGENCY: [Faded]
REPORTING AGENCY ADDRESS: [Faded]
REPORTING AGENCY CITY: [Faded]
REPORTING AGENCY STATE: [Faded]
REPORTING AGENCY ZIP: [Faded]

6342

Operator Signature

[Handwritten Signature]

Operator Signature

[Handwritten Signature]

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BAC DataMaster
Evidence Ticket

STATE OF MISSISSIPPI
DEPARTMENT OF TRANSPORTATION
LABORATORY
3801 BRIDGES BLVD
MEMPHIS, TN 38118
TEL: 901-744-2000
WWW.MISSISSIPPIDEPTOFTRANSPORTATION.COM

Operator Signature [Signature]

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