



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

received 1/14/14-cd

**REVIEWED**

REPORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 15 days) or 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.

By Carol Day at 9:24 am, Feb 06, 2014

DATAMASTER SN 201265	NAME OF AGENCY La Grange Police Department	DATE OF INSPECTION 01/08/2014
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LOCATION OF INSTRUMENT (STREET AND CITY) 204 West Washington Street, La Grange	TIME OF INSPECTION 8:17 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.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) 01/08/14 2017
<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

<input checked="" type="checkbox"/> INDICATOR LIGHTS
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER Guth Laboratories Inc LOT # 13280 EXP. DATE 10/16/2015

<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN DR 5388 EXP. DATE 03/25/2014
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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)

<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 → .097	TEST 2 → .097	TEST 3 → .097
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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) 5	(.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).

Datamaster 201265 complies with the Department of Health and Senior Services rules and regulations

**INSPECTING OFFICER**

SIGNATURE 	PRINT FULL NAME Don L Cibert
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TYPE II PERMIT NUMBER/EXPIRATION DATE 220328 10/02/2014	TELEPHONE NUMBER (573) 655-4099
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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

T-169 P0008/0013 F-877  
5736554528  
LAGRANGE POLICE  
01-09-14 16:06 FROM-

**GUTH LABORATORIES, INC.**

680 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°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.*

# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
LA. GRANGE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201265

01/08/14

20:17

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS

SAMPLE CHAMBER: 48c

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

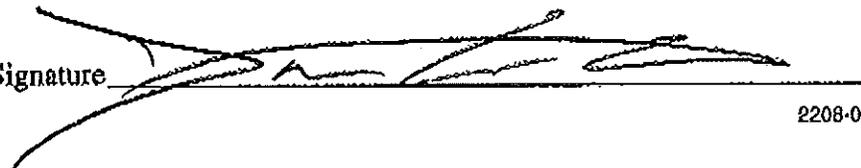
QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

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

Operator Signature



# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
LAGRANGE POLICE DEPARTMENT

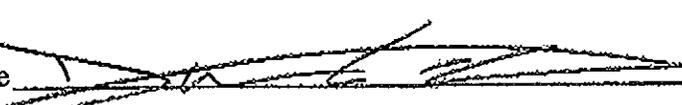
BAC DATAMASTER SERIAL NUMBER 201265  
01/09/14

TESTING OFFICER:  
CIBERT/DON/L.  
OFFICER I.D.: 112  
PERMIT NUMBER: 228328  
EXPIRATION DATE: 10/04/14  
MISCELLANEOUS DATA:  
MONTHLY MAINTENANCE

----- SUPERVISOR MODE -----

BLANK TEST	.000	20:21
INTERNAL STANDARD	VERIFIED	20:21
EXTERNAL STANDARD	.097	20:21
BLANK TEST	.000	20:22
EXTERNAL STANDARD	.097	20:22
BLANK TEST	.000	20:23
EXTERNAL STANDARD	.097	20:24
BLANK TEST	.000	20:24

N = 3  
STM. = .1  
AVG. = .097

Operator Signature 

# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
LAGRANGE POLICE DEPARTMENT

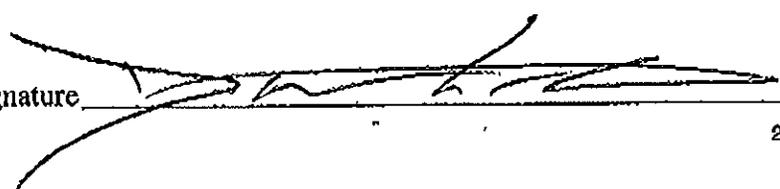
BAC DATAMASTER SERIAL NUMBER 201265  
01/02/14

ARREST TIME: 20:00  
SUBJECT NAME:  
RFI/TEST  
DOB: 11/11/11      SEX: M  
STATE/D.L.: MO/11111111  
ARRESTING OFFICER:  
N/A  
OFFICER I.D.: N/A  
TESTING OFFICER:  
CIBERT/DON/L  
OFFICER I.D.: 112  
PERMIT NUMBER: 280328  
EXPIRATION DATE: 10/02/14  
MISCELLANEOUS DATA:  
RFI TEST  
MONTHLY MAINTENANCE

----- BREATH ANALYSIS -----

BLANK TEST	.000	20:27
INTERNAL STANDARD	VERIFIED	20:27
RADIO INTERFERENCE		

Operator Signature \_\_\_\_\_



State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



DON L CIBERT

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 10/02/2012

Number 220328

Expires 10/02/2014

Director of State Public Health Laboratory

Director, Department of Health