



BREATH ALCOHOL PROGRAM
DATAMASTER MAINTENANCE REPORT

RECEIVED REPORT #
 By Carol Day at 12:23 pm, Oct 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 <u>201268</u>	NAME OF AGENCY <u>Vandalia Police Dept.</u>	DATE OF INSPECTION <u>10-23-2014</u>
LOCATION OF INSTRUMENT (STREET AND CITY) <u>201 E. Park Vandalia Mo. 63382</u>		TIME OF INSPECTION <u>09:34</u>

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) <u>10-23-14 09:34</u>
<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 <u>49.0</u> °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 <u>Guth Labs</u> LOT # <u>14200</u> EXP. DATE <u>08-05-2016</u>	
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34.0</u> °C SIMULATOR SN <u>SD2280</u> EXP. DATE <u>04-22-2015</u>	
<input checked="" type="checkbox"/> 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 <u>.097</u>	TEST 2 <u>.096</u>
TEST 3 <u>.096</u>	

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) <u>1</u>	(.05-.09)	(.10-.14)	(.15-.19)	OVER .19
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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 <u>Raymond A. Laird</u>	PRINT FULL NAME <u>Raymond A. Laird</u>
TYPE, PERMIT NUMBER/EXPIRATION DATE <u>220 392 11-19-14</u>	TELEPHONE NUMBER <u>573-594-6186</u>

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.

580 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-564-6470

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.

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



RAYMOND A LAIRD

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 1988.

Date 11/19/2012

Number 220392

Expires 11/19/2014

Director of State Public Health Laboratory

Director, Department of Health

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
VANDALIA POLICE DEPARTMENT

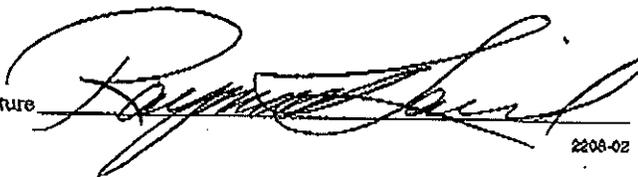
BAC DATAMASTER SERIAL NUMBER 201260
10/23/14

ARREST TIME: 01:01
SUBJECT NAME:
N/A
DOB: 01/01/01 SEX: M
STATE/D.L.: MO/N/A
ARRESTING OFFICER:
N/A
OFFICER I.D.: N/A
TESTING OFFICER:
LAIRD/RAYMOND/A
OFFICER I.D.: 202
PERMIT NUMBER: 220392
EXPIRATION DATE: 11/19/14
MISCELLANEOUS DATA:
RFI/TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	10:37
INTERNAL STANDARD	VERIFIED	10:37
RADIO INTERFERENCE		

Operator Signature



2208-02

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
VANDALIA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201268
10/23/14

TESTING OFFICER:
LAIRD/RAYMOND/R
OFFICER I.D.: 202
PERMIT NUMBER: 220392
EXPIRATION DATE: 11/19/14
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	10:25
INTERNAL STANDARD	VERIFIED	10:25
EXTERNAL STANDARD	.097	10:25
BLANK TEST	.000	10:26
EXTERNAL STANDARD	.096	10:27
BLANK TEST	.000	10:27
EXTERNAL STANDARD	.096	10:28
BLANK TEST	.000	10:28

N = 3
SIM. = .1
AVG. = .0963

Operator Signature



2208-02

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
WANDALIA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201268
10/23/14
09:34

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM (84-07-2005): OKAY
HEATERS
SAMPLE CHAMBER: 49c
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

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

Operator Signature 