



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

**RECEIVED** REPORT #6  
 By Carol Day at 11:46 am, May 30, 2014

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days) or when 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 201291	NAME OF AGENCY CABOOL POLICE DEPARTMENT	DATE OF INSPECTION 05/25/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 510 CEDAR STREET, CABOOL, MO. 65689		TIME OF INSPECTION 12:10 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) 05/25/14, 1211
<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 LOT # 13280 EXP. DATE 10/16/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN DR5384 EXP. DATE 04/17/2015

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 ➔ .098	TEST 2 ➔ .098	TEST 3 ➔ .098
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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 3	(0-.04) 0	(.05-.09) 2	(.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).

<b>INSPECTING OFFICER</b>	
SIGNATURE 	PRINT FULL NAME WALTER L. DARTER
TYPE II PERMIT NUMBER/EXPIRATION DATE 240158 04/22/2016	TELEPHONE NUMBER (417) 962-3993

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: 717-584-5470

## 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 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 MISSOURI  
CRAWFORD POLICE DEPARTMENT

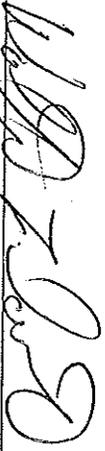
BAC DATAMASTER SERIAL NUMBER 201291  
05/25/14

ARREST TIME: 12:00  
SUBJECT NAME:  
SOBER/CHECK  
DOB: 01/01/01 SEX: M  
STATE/D.L.: MO/0  
ARRESTING OFFICER:  
DARTER/WALTER/L  
OFFICER I.D.: 102  
TESTING OFFICER:  
DARTER/WALTER/L  
OFFICER I.D.: 102  
PERMIT NUMBER: 240150  
EXPIRATION DATE: 04/22/16  
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 12:24  
INTERNAL STANDARD VERIFIED 12:24  
SUBJECT SAMPLE .000 12:25  
BLANK TEST .000 12:25

Operator Signature



Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
CRAWFORD POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201291  
05/25/14

ARREST TIME: 12:00  
SUBJECT NAME:  
RFI/CHECK  
DOB: 01/01/01 SEX: M  
STATE/D.L.: MO/0  
ARRESTING OFFICER:  
DARTER/WALTER/L  
OFFICER I.D.: 102  
TESTING OFFICER:  
DARTER/WALTER/L  
OFFICER I.D.: 102  
PERMIT NUMBER: 240150  
EXPIRATION DATE: 04/22/16  
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 12:22  
INTERNAL STANDARD VERIFIED 12:22  
RADIO INTERFERENCE

Operator Signature



Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
CABOOL POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201291  
05/25/14

TESTING OFFICER:  
DRATER/WALTER/L  
OFFICER I.D.: 102  
PERMIT NUMBER: 240158  
EXPIRATION DATE: 04/22/16  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	12:15
INTERNAL STANDARD	VERIFIED	12:15
EXTERNAL STANDARD	.098	12:15
BLANK TEST	.000	12:16
EXTERNAL STANDARD	.098	12:16
BLANK TEST	.000	12:17
EXTERNAL STANDARD	.098	12:17
BLANK TEST	.000	12:18

N = 3  
SIM. = .1  
RWS. = .098

Operator Signature 

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
CABOOL POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201291  
05/25/14  
12:11

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY  
PROGRAM (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  
!@#%&'()\*+,-./0123456789:;<=>?@BCDEFG  
HIJKLMNPOQRSTUVWXYZ[\]^\_`abcde+ghijklmno  
pqrstuvwxyz{|}~

Operator Signature 



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

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**PERMIT**  
**TYPE II**  
**WALTER L DARTER**

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 4/22/2014

NUMBER 240158

EXPIRES 4/22/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 590-0771 (6-10)

LAB-4 (R6-10)



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

**INSTRUMENT OPERATOR CARD**

*The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.*



Operator **DARTER, WALTER**  
 Permit No **240158**  
 Date Issued **4/22/2014**    Date Expires **4/22/2016**



# Simulator Calibration Report

This calibration report is to certify the alcohol reference simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance with the standards set by the Missouri Department of Health and Senior Services Rules and Regulations:  
19CSR 25-30.051 (4).

Checked: 4/17/2014      Expires: 04/17/2015  
Digital Therm. SN:094948  
MSC Tech:RW      Temp:33.98  
Agency: Cabool Police Dept  
DR 5384



Technician Printed Name: ROBERT WELSH

Technician Signature: 

Date: 04/17/2014

Contact: Missouri Safety Center

Breath Alcohol Instrument Training Program

660-543-4834