



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

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.

DATAMASTER SN 201294	NAME OF AGENCY MACON POLICE DEPARTMENT	DATE OF INSPECTION 3-12-14
LOCATION OF INSTRUMENT (STREET AND CITY) 301 E. BOURKE MACON MO		TIME OF INSPECTION 15:44

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) 03/12/14 15:44
<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 type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER **GLUEH LAB** LOT # **13290** EXP. DATE **10-29-15**

SIMULATOR TEMP (34°C ± 0.2°C) **34** °C SIMULATOR SN **502668** EXP. DATE **02-24-15**

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 • 101%	TEST 2 • 103%	TEST 3 • 103%
----------------------	----------------------	----------------------

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) 0 (.15-.19) 0 OVER .19 0

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).
MEETS DOH STANDARDS

INSPECTING OFFICER

SIGNATURE Jeff Brown	PRINT FULL NAME JEFF BROWN
TYPE II PERMIT NUMBER EXPIRATION DATE 220115 05-15-14	TELEPHONE NUMBER 660 385 2195

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 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-6470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13290 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 31, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1202% (w/vol) ethyl alcohol. The expiration date for this lot number is October 29, 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

JEFF BROWN



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 05/15/2012

Number 220115

Expires 05/15/2014

MS 640-071 (2-88)

W. B. ...
Director of State Public Health Laboratory

W. B. ...
Director, Department of Health

Lab. 4 (87-68)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
MACON POLICE DEPARTMENT

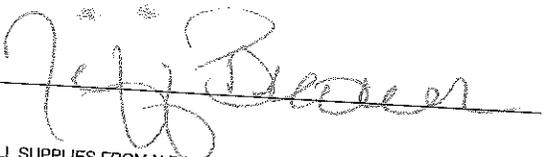
MAC DATA MASTER SERIAL NUMBER 291294
03/12/14

TESTING OFFICER:
BROWN/JEFF
OFFICER I.D.: 783
PERMIT NUMBER: 290115
EXPIRATION DATE: 03/15/14
MISCELLANEOUS DATA:
MONTHLY MAINTENANCE
N/A

--- SUPERVISOR MODE ---

BLANK TEST	.000	16:03
INTERNAL STANDARD	VERIFIED	16:04
INTERNAL STANDARD	.101	16:04
BLANK TEST	.000	16:05
INTERNAL STANDARD	.103	16:05
BLANK TEST	.000	16:06
INTERNAL STANDARD	.103	16:06
BLANK TEST	.000	16:07

= 3
M. = .1
S. = .1023

SIGNATURE 

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
MACON POLICE DEPARTMENT

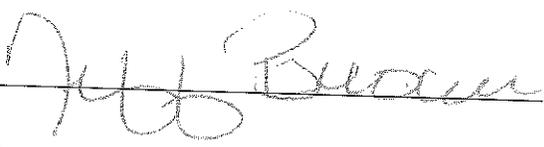
MAC DATA MASTER SERIAL NUMBER 291294
03/12/14
15:44

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM (G4-RZ-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:;<=>?@ABCDEF6
HJKLmnopqrstuvwxyz{|}~`' abcdefghijklmnop
qrstuvwxyz{|}~`

OPERATOR SIGNATURE 

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
MADON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER: 201204
03/12/14

ARREST TIME: 15:30

SUBJECT NAME:

BLUM/JUE

DOB: 12/04/69 SEX: M

STATE/D.L.L.: MO/348698370P

ARRESTING OFFICER:

M/S.

OFFICER I.D.: N/A

TESTING OFFICER:

BROWN/JEFF

OFFICER I.D.: 763

PERMIT NUMBER: 220115

EXPIRATION DATE: 05/15/14

MISCELLANEOUS DATA:

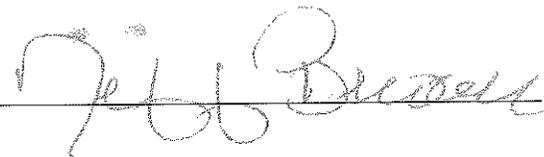
RFI CHECK

N/A

--- BREATH ANALYSTS ---

BLIND TEST	LOGG	15:55
INTERNAL STANDARD	VERIFIED	15:55
RADIO INTERFERENCE		

OPERATOR SIGNATURE



Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901