



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

**RECEIVED**  
 By Carol Day at 10:29 am, Jun 18, 2014

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 <u>201277</u>	NAME OF AGENCY <u>Webb City Police Dept.</u>	DATE OF INSPECTION <u>06-05-2014</u>
LOCATION OF INSTRUMENT (STREET AND CITY) <u>211 W. Broadway St.</u>		TIME OF INSPECTION <u>2257</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>06-05-2014 @ 2257</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</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

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 SDJ754 EXP. DATE 07-10-2014

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 <u>.095</u>	TEST 2 <u>.095</u>	TEST 3 <u>.097</u>
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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 <u>0</u>	(0-.04) <u>0</u>	(.05-.09) <u>2</u>	(.10-.14) <u>6</u>	(.15-.19) <u>0</u>	OVER .19 <u>0</u>
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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

PRINT FULL NAME  
Jeff Cornett

TYPE II PERMIT NUMBER/EXPIRATION DATE

230322 12-23-2015

TELEPHONE NUMBER

(417) 673-1911

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 17111-4511 • TELEPHONE: 717-664-5470

## 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.*

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
WEBB CITY POLICE DEPARTMENT

PC DATAMASTER SERIAL NUMBER 201297  
06/05/14  
22:57

--- BIRDSNOSTIC CHECK ---

COMPUTER: OKAY  
MOTOR (CV-07-220S): OKAY  
SEATBELT CHAMBER: 49c  
ALCOHOL DETECTOR: OKAY  
PUMP: OKAY  
ALARM SPEED: OKAY  
EXHAUSTOR: OKAY  
FILTERS: OKAY  
SUNSETZ STANDARD: OKAY  
CALIBRATION: OKAY

PRINTER TEST  
!@#\$%^&\*()<>+,-./0:123456789:;=<?@#BCDEFG  
HIJKLMNOPQRSTUVWXYZ[\]^\_`abcedefghijklmnop  
qrstuvwxyz{|}~\*+<

*Signature* #413

Operator Signature

2209-02

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
WEBB CITY POLICE DEPARTMENT

PC DATAMASTER SERIAL NUMBER 201257  
06/05/14

STING OFFICER:  
DORNETT/JEFF/A  
ICER I.D.: 443  
MIT NUMBER: 230022  
IRRATION DATE: 12/23/15  
SCELLANEDUS DATA:

--- SUPERVISOR MODE ---

INK TEST .000 23:04  
FERNAL STANDARD VERIFIED 23:04  
FERNAL STANDARD .095 23:04  
INK TEST .000 23:05  
FERNAL STANDARD .097 23:05  
INK TEST .000 23:06  
FERNAL STANDARD .097 23:06  
INK TEST .000 23:07

: 3  
1. = .1  
2. = .0963

*Signature* #413

Signature

2208-02

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
WEBB CITY POLICE DEPARTMENT

C DATAMASTER SERIAL NUMBER 201297  
06/05/14

EST TIME: 00:23  
JECT NAME:  
FI/TEST  
: 01/01/02 SEX: M  
TE/D.L.: NO/123456789  
ESTING OFFICER:  
DORNETT/JEFF/A  
ICER I.D.: 443  
TING OFFICER:  
AME  
ICER I.D.: 443  
MIT NUMBER: 230022  
IRRATION DATE: 12/23/15  
CELLANEDUS DATA:

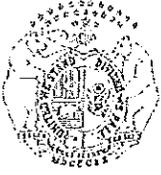
--- BREATH ANALYSIS ---

INK TEST .000 23:12  
FERNAL STANDARD VERIFIED 23:12  
IO INTERPERENCE

*Signature* #413

Signature

2209-



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



PERMIT  
TYPE II

JEFFREY A CORNETT

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, INTOXILYZER 8000**

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 12/23/2013

NUMBER 230322

EXPIRES 12/23/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAP-4 (16-10)



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 CORNETT, JEFFREY  
Permit No 230322  
Date Issued 12/23/2013 Date Expires 12/23/2015