



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

DATAMASTER MAINTENANCE REPORT

RECEIVED
By Carol Day at 2:52 pm, May 19, 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 201300	NAME OF AGENCY St. James Police Department	DATE OF INSPECTION 05/06/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 200 North Bourbeuse Street St. James MO 65559		TIME OF INSPECTION 12:12 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) 05-06-2014 12:12 pm
<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 <u>Guth Laboratories</u>	LOT # <u>13280</u>	EXP. DATE <u>10/16/2015</u>
--	--------------------	-----------------------------

<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) _____ 34.0 _____ °C	SIMULATOR SN _____ SD2766	EXP. DATE <u>01/15/2015</u>
---	---------------------------	-----------------------------

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 → .099	TEST 2 → .100	TEST 3 → .102
---------------	---------------	---------------

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)	(.05-.09)	(.10-.14)	(.15-.19)	OVER .19
----------	---------	-----------	-----------	-----------	----------

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 <i>Jeffrey R. Brooks #1150</i>	PRINT FULL NAME Jeffrey R. Brooks #1150
TYPE II PERM. NUMBER/EXPIRATION DATE 230047 / 03/21/2015	TELEPHONE NUMBER (573) 265-7012

RETURN COMPLETED REPORT TO THE: **Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2876 James Blvd.
Poplar Bluff, MO 63901**



GUTH LABORATORIES, INC.

880 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

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 $34^{\circ}\text{C} \pm 0.2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L $\pm 3\%$.

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
SAINT JAMES POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201300
05/06/14
12:12

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM (04-07-2009):	OKAY
HEATERS	
SAMPLE CHAMBER:	48c
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY

DETECTOR: OKAY

FILTERS: OKAY

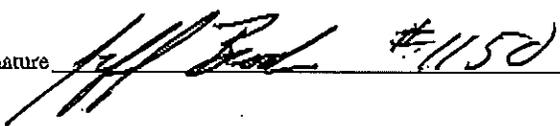
REACT2 STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

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

Operator Signature



Face This Side Down - This Edge In first

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
SAINT JAMES POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 261398
05/06/14

TESTING OFFICER:

BROOKS/JEFF/R

OFFICER I.D.: 1150

PERMIT NUMBER: 290047

EXPIRATION DATE: 03/21/15

MISCELLANEOUS DATA:

--- SUPERVISOR MODE. ---

BLANK TEST	.000	12:14
INTERNAL STANDARD	VERIFIED	12:15
EXTERNAL STANDARD	.099	12:15
BLANK TEST	.000	12:16
EXTERNAL STANDARD	.100	12:16
BLANK TEST	.000	12:17
EXTERNAL STANDARD	.102	12:17
BLANK TEST	.000	12:18

N = 3

SIM. = .1

AVG. = .1003

Operator Signature

Jeff Brooks #1150

2209-02

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
SAINT JAMES POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201300
05/06/14

ARREST TIME: 11:00

SUBJECT NAME:

RFI TEST

DOB: 01/01/88 SEX: M

STATE/D.L.: NA/NA

ARRESTING OFFICER:

BROOKS/JEFF/R

OFFICER I.D.: 1150

TESTING OFFICER:

BROOKS/JEFF/R

OFFICER I.D.: 1150

PERMIT NUMBER: 230047

EXPIRATION DATE: 03/21/15

MISCELLANEOUS DATA:

RFI TEST

--- BREATH ANALYSIS ---

RADIO INTERFERENCE

Operator Signature

Jeff Brooks 1150

2208-02



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



**PERMIT
TYPE II**

JEFFREY R BROOKS

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 03/21/2013
NUMBER 230047
EXPIRES 03/21/2015

MO 590-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

W. S. ...
David V. ...
Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (16-10)