



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

**RECEIVED**

By Carol Day at 12:53 pm, Sep 22, 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 201306	NAME OF AGENCY MOUNTAIN VIEW POLICE	DATE OF INSPECTION 09/15/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 117 NORTH PINE STREET		TIME OF INSPECTION 5:34 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) <del>09-15-2014</del> 9-15-14 1800
<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 _____ 47 °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>610N9030209</u> EXP. DATE <u>05/01/2016</u>	
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>3402</u> °C SIMULATOR SN <u>SD1425</u> EXP. DATE <u>07/29/2015</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 ➔ .100
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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	0	(0-.04)	10	(.05-.09)	0	(.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).

MONTHLY MAINTANCE CHECK INSTRUMENT OK

<b>INSPECTING OFFICER</b>	
SIGNATURE <i>Thomas R. Poindexter</i>	PRINT FULL NAME THOMAS .R. POINDEXTER
TYPE II PERMIT NUMBER/EXPIRATION DATE 240213 04/30/2016	TELEPHONE NUMBER (417) 934-2525

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: 717-564-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14110 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **May 5, 2014**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1206%** (w/vol) ethyl alcohol. The expiration date for this lot number is **May 1, 2016** at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of  $0.100 \text{ g}/210\text{L} \pm 3\%$ .

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.*



# 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:  
19 CSR 25-30.051 (4).

Checked: 07/29/2014 Expires: 07/29/2015  
Digital Therm. SN:094948  
MSC Tech:DRL Temp:34.00  
Agency: Mountain View Police Dept  
SD 1425



Technician Printed Name: DAW LUCAS

Technician Signature: [Handwritten Signature]

Date: 07/29/2014

Contact: Missouri Safety Center

Breath-Alcohol Instrument Training Program

660-543-4834

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
BAC DATAMASTER SERIAL NUMBER 201306  
09/15/14

ARREST TIME: 05:30  
SUBJECT NAME:  
RADIO TEST  
DOB: 01/06/76 SEX: M  
STATE/D.L.: AZ/85231  
ARRESTING OFFICER:  
POINDEXER/THOMAS/R  
OFFICER I.D.: 122  
TESTING OFFICER:  
POINDEXER/THOMAS/R  
OFFICER I.D.: 122  
PERMIT NUMBER: 240213  
EXPIRATION DATE: 04/30/16  
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 17:55  
INTERNAL STANDARD VERIFIED 17:55  
RADIO INTERFERENCE

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
BAC DATAMASTER SERIAL NUMBER 201306  
09/15/14

TESTING OFFICER:  
POINDEXER/THOMAS/R  
OFFICER I.D.: 122  
PERMIT NUMBER: 240213  
EXPIRATION DATE: 04/30/16  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST .000 17:48  
INTERNAL STANDARD VERIFIED 17:48  
EXTERNAL STANDARD .099 17:48  
BLANK TEST .000 17:49  
EXTERNAL STANDARD .100 17:49  
BLANK TEST .000 17:50  
EXTERNAL STANDARD .100 17:50  
BLANK TEST .000 17:51

N = 3  
SIM. = .1  
AVG. = .0996

Operator Signature

*Thomas R Poindexter*

Operator Signature

*Thomas R Poindexter*

**BAC DataMaster**  
**Evidence Ticket**

STATE OF MISSOURI  
BAC DATAMASTER SERIAL NUMBER 201306  
09/15/14  
17:34

--- 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:;<=>?@ABCDEFGHIJ  
KLMNOPQRSTUVWXYZ[\]^\_`abcdefghijklmnopq  
rstuvwxyz{|}~

Operator Signature James R Powell