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

DATAMASTER MAINTENANCE REPORT

received 3/1/14 cd

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.

REVIEWED
By Carol Day at 2:21 pm, Mar 06, 2014

DATAMASTER SN	NAME OF AGENCY	DATE OF INSPECTION
202005	INV# 25467	02/24/14
LOCATION OF INSTRUMENT (STREET AND CITY)		TIME OF INSPECTION
DONIPHAN POLICE DEPARTMENT		

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.

- [X] DIAGNOSTIC CHECK (PRINTOUT ATTACHED) — DATE AND TIME (from printout) 02/24/14 1325
- [X] COMPUTER — [X] DETECTOR
- [X] PROGRAM — [X] FILTERS
- [X] HEATERS SAMPLE CHAMBER 49 °C — [X] QUARTZ STANDARD
- [X] FLOW DETECTOR — [X] CALIBRATION
- [X] PUMP HIGH SPEED — [X] PRINTER
- [X] INDICATOR LIGHTS
- [X] SIMULATOR SOLUTION SUPPLIER GUTH LABORATORIES — LOT # 13280 — EXP. DATE 10/16/15
- [X] SIMULATOR TEMP (34°C ± 0.2°C) 34°C °C — SIMULATOR SN 115394 — EXP. DATE 02/18/15
- [X] 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)

- [X] 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	TEST 2	TEST 3
.099	.100	.101

- [X] 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
0	0	0	2	1	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).

INSPECTING OFFICER

SIGNATURE	PRINT FULL NAME
Russell B. Arnold	RUSSELL B. ARNOLD
TYPE II PERMIT NUMBER/EXPIRATION DATE	TELEPHONE NUMBER
220273 09/15/14	573-840-9500

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

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
services provided on a nondiscriminatory basis

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 **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 **FNI22211-02** 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

PERMIT
TYPE II

RUSSELL B ARNOLD

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 09/15/2012

Number **220273**

Expires 09/15/2014

Director of State Public Health Laboratory

Director, Department of Health

MO 580-0771 (7-88)

Lab. 4 (R7-88)

Missouri Department of Health and Senior Services
P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010
RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466
Margaret T. Donnelly
Director

Jeremiah W. (Jay) Nixon
Governor

Missouri Department of Health and Senior Services Breath Alcohol Program

SIMULATOR CALIBRATION REPORT

This is to certify that the simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance to the standards set by the Rules of Missouri Department of Health and Senior Services, 19 CSR 25-30.

SIMULATOR INFORMATION

Agency: Missouri State Highway Patrol
Serial Number: 0300
Manufacturer: RepCo
Model Number: 3402C

CALIBRATION RESULTS

Reference Temperature	Simulator Temperature	Bias	In Tolerance
33.93	34.00	-0.07 °C	YES

This calibration was performed with NIST-Traceable Thermometer SN: 304447

This calibration was performed by: Brian M. Lutmer

This calibration was performed: 02/18/2014

COPY OF CALIBRATION STICKER

This simulator has been calibrated according to DHSS specifications

SIMULATOR SERIAL NO.:	0300
EXPIRATION DATE:	02/18/2015
DATE OF CALIBRATION:	02/18/2014
NIST REF. THERM. SERIAL NO:	304447
BIAS:	-0.07 C
ANALYST INITIALS:	BML

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 20200
02/24/14

ARREST TIME: 13:00
SUBJECT NAME:
D
DOB: 12/31/31 SEX: M
STATE/D.L.: MO/123456789
ARRESTING OFFICER:
A
OFFICER I.D.: 116
TESTING OFFICER:
A
OFFICER I.D.: 116
PERMIT NUMBER: 220273
EXPIRATION DATE: 09/15/14
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	1
INTERNAL STANDARD	VERIFIED	1
RADIO INTERFERENCE		

erator Signature R.B. 02/24/14

Face This Side Down - This Edge In Fir

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATRO
BAC DATAMASTER SERIAL NUMBER 20
02/24/14
13:25

--- 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:;<=>?
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefg
pqrstuvwxyz{|}→

Operator Signature R.B. 02/24/

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 202005
02/24/14

TESTING OFFICER:
ARNOLD/R/B
OFFICER I.D.: 116
PERMIT NUMBER: 220273
EXPIRATION DATE: 09/15/14
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	13:30
INTERNAL STANDARD	VERIFIED	13:30
EXTERNAL STANDARD	.099	13:30
BLANK TEST	.000	13:31
EXTERNAL STANDARD	.100	13:31
BLANK TEST	.000	13:32
EXTERNAL STANDARD	.101	13:32
BLANK TEST	.000	13:33

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

Operator Signature R.B. 02/14/14