



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 203042	NAME OF AGENCY University of Missouri Police Department	DATE OF INSPECTION 07/06/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 901 Virginia Ave, Columbia		TIME OF INSPECTION 10:13 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) 07/06/2014 22:13
<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 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 Labs</u> LOT # <u>13290</u> EXP. DATE <u>10/29/2015</u>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34.0</u> °C SIMULATOR SN <u>DR1293</u> EXP. DATE <u>12/06/2014</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 → 0.099	TEST 2 → 0.100	TEST 3 → 0.101
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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	1	(0-.04)	2	(.05-.09)	6	(.10-.14)	4	(.15-.19)	2	OVER .19	4
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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).

Instrument was operating within Department of Health Regulations.

INSPECTING OFFICER	
SIGNATURE 	PRINT FULL NAME Jennifer Lynch
TYPE II PERMIT NUMBER/EXPIRATION DATE 230257 11/21/2015	TELEPHONE NUMBER (573) 882-7201

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: 717-664-6470

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.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
UNIVERSITY OF MISSOURI POLICE

BAC DATAMASTER SERIAL NUMBER 203042
07/06/14

TESTING OFFICER:
LYNCH/JENNIFER/ANN
OFFICER I.D.: 14
PERMIT NUMBER: 230257
EXPIRATION DATE: 11/21/15
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	22:17
INTERNAL STANDARD	VERIFIED	22:17
EXTERNAL STANDARD	.099	22:17
BLANK TEST	.000	22:18
EXTERNAL STANDARD	.100	22:18
BLANK TEST	.000	22:19
EXTERNAL STANDARD	.101	22:19
BLANK TEST	.000	22:20

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

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANASSAS, VA 20108



FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
UNIVERSITY OF MISSOURI POLICE

BAC DATAMASTER SERIAL NUMBER 203042
07/06/14
22:13

--- 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:;<=?@ABCDEF
GHIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmnop
qrstuvwxyz{|}~

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANASSAS, VA 20108



TAKE THIS SIDE DOWN - THIS SIDE UP IN FILE

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
UNIVERSITY OF MISSOURI POLICE

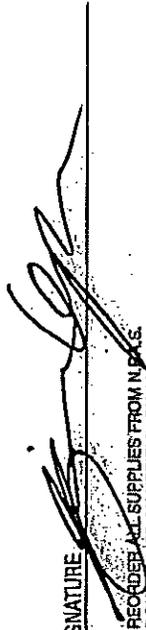
BAC DATA MASTER SERIAL NUMBER 203042
07/06/14

ARREST TIME: 22:00
SUBJECT NAME: RADIO/FREQUENCY/TEST
DOB: 01/01/01 SEX: M
STATE/D.L.: NA/NA
ARRESTING OFFICER: NA
OFFICER I.D.: NA
TESTING OFFICER: LYNCH/JENNIFER/ANN
OFFICER I.D.: 14
PERMIT NUMBER: 230257
EXPIRATION DATE: 11/21/15
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 22:22
INTERNAL STANDARD VERIFIED 22:22
RADIO INTERFERENCE

OPERATOR SIGNATURE



Card Stock No.
60021

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

TAKE THIS SIDE DOWN - THIS SIDE UP IN FILE

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
UNIVERSITY OF MISSOURI POLICE

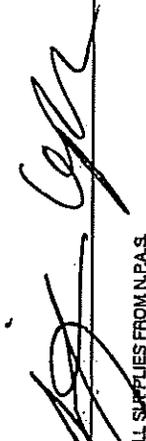
BAC DATA MASTER SERIAL NUMBER 203042
07/06/14

ARREST TIME: 22:00
SUBJECT NAME: TEST
DOB: 01/02/03 SEX: F
STATE/D.L.: NA/NA
ARRESTING OFFICER: NA
OFFICER I.D.: NA
TESTING OFFICER: LYNCH/JENNIFER/ANN
OFFICER I.D.: 13
PERMIT NUMBER: 230257
EXPIRATION DATE: 11/21/15
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 22:26
INTERNAL STANDARD VERIFIED 22:26
SUBJECT SAMPLE .000 22:26
BLANK TEST .000 22:27

OPERATOR SIGNATURE



Card Stock No.
60021

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



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

2

PERMIT
TYPE II
JENNIFER LYNCH

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 11/21/2013

NUMBER 230257

EXPIRES 11/21/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

acting director
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (110-10)

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 LYNCH, JENNIFER
Permit No 230257
Date Issued 11/21/2013 Date Expires 11/21/2015