



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

**RECEIVED**  
 By Carol Day at 9:40 am, Jul 11, 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 201083	NAME OF AGENCY Boone County Sheriff's Department	DATE OF INSPECTION 07/08/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 2121 County Drive Columbia		TIME OF INSPECTION 3:15 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) 07/08/14 15:16
<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

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER Guth Laboratories LOT # 13100 EXP. DATE 04/23/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD2218 EXP. DATE 02/18/2015

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 .097	TEST 2 .099	TEST 3 .099
-------------	-------------	-------------

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)	1	(.05-.09)	5	(.10-.14)	10	(.15-.19)	5	OVER .19	1
----------	---	---------	---	-----------	---	-----------	----	-----------	---	----------	---

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 Gabe Edwards
TYPE II PERMIT NUMBER/EXPIRATION DATE 230286 11/26/2015	TELEPHONE NUMBER (573) 875-1111

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

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
BAC DATA MASTER SERIAL NUMBER 2010083  
07/08/14

ARREST TIME: 00:00  
SUBJECT NAME:  
RFI/TEST

DOB: 10/10/01 SEX: M  
STATE/D.L.: MO/12345678910  
ARRESTING OFFICER:  
N/A

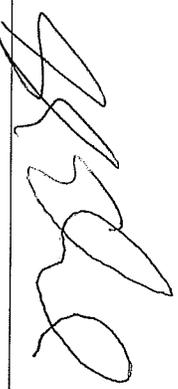
OFFICER I.D.: N/A  
TESTING OFFICER:  
EDWARDS/G

OFFICER I.D.: 463  
PERMIT NUMBER: 2300286  
EXPIRATION DATE: 11/26/15  
MISCELLANEOUS DATA:  
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST .000 15:23  
INTERNAL STANDARD VERIFIED 15:23  
RADIO INTERFERENCE

Operator Signature



2200-02

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
BAC DATA MASTER SERIAL NUMBER 2010083  
07/08/14

TESTING OFFICER:  
EDWARDS/G

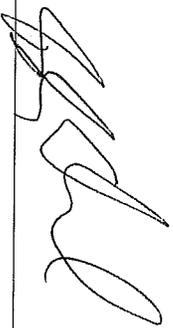
OFFICER I.D.: 463  
PERMIT NUMBER: 2300286  
EXPIRATION DATE: 11/26/15  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST .000 15:17  
INTERNAL STANDARD VERIFIED 15:17  
EXTERNAL STANDARD .097 15:18  
BLANK TEST .000 15:19  
EXTERNAL STANDARD .099 15:19  
BLANK TEST .000 15:20  
EXTERNAL STANDARD .099 15:20  
BLANK TEST .000 15:21

N = 3  
SIM. = .1  
RWG. = .0993

Operator Signature



2200-02

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
BAC DATA MASTER SERIAL NUMBER 2010083  
07/08/14  
15:16

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS  
SAMPLE CHAMBER: 49c

FLOW DETECTOR: OKAY

PUMP  
HIGH SPEED: OKAY

DETECTOR: OKAY

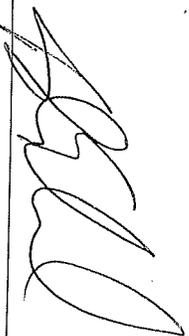
FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST  
! " # \$ % ' ( ) \* + , - . / 0 1 2 3 4 5 6 7 8 9 : ; < = > ? @ A B C D E F G  
H I J K L M N O P Q R S T U V W X Y Z [ \ ] ^ \_ ` a b c d e f g h i j k l m n o  
p q r s t u v w x y z { | } ~ \* \* \* \* \*

Operator Signature



2200-02



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

2

**PERMIT**  
**TYPE II**  
**GABE EDWARDS**

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**ALCO-SENSOR IV WITH PRINTER, 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 11/26/2013

NUMBER 230286

EXPIRES 11/26/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

**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 EDWARDS, GABE  
Permit No 230286  
Date Issued 11/26/2013 Date Expires 11/26/2015



# GUTH LABORATORIES, INC.

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

Bottle #656

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13100 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on April 29, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1214% (w/vol) ethyl alcohol. The expiration date for this lot number is April 23, 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.*