



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

RECEIVED REPORT #6
By Carol Day at 11:32 am, Apr 29, 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 204112	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 04/23/2014
LOCATION OF INSTRUMENT (STREET AND CITY) Brookfield Police Department, 116 W. Brooks, Brookfield, MO		TIME OF INSPECTION 9:08 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) 04/23/14 2108
<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 50°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, Inc. LOT # 13290 EXP. DATE 10/29/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN SD 2763 EXP. DATE 03/11/2015

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 .095	TEST 2 .096	TEST 3 .097
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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)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	1	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).

Meets Department of Health Standards
TAKEN OUT OF SERVICE

INSPECTING OFFICER

SIGNATURE <i>Lane P. Quinn</i>	PRINT FULL NAME Lane P. Quinn
TYPE II PERMIT NUMBER/EXPIRATION DATE 240180 / 04-22-16	TELEPHONE NUMBER (660) 385-2132

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: 717-564-5470

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 $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, 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.



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

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PERMIT
TYPE II
LANE P QUINN

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, INTOX DMT

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 4/22/2014

NUMBER 240180

EXPIRES 4/22/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

**9 580-0771 (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 QUINN, LANE
 Permit No 240180
 Date issued 4/22/2014 Date Expires 4/22/2016

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE LABORATORY, MOBILE
BAC DATAMASTER SERIAL NUMBER 204312
494-03-14

TESTING OFFICER:
AGENCY:
OFFICER ID#:
PERMIT NUMBER:
EXPIRATION DATE:
MISCELLANEOUS DATA:

BLANK TEST	_____	_____
INTERNAL STANDARD	_____	_____
EXTERNAL STANDARD	_____	_____
BLANK TEST	_____	_____
INTERNAL STANDARD	_____	_____
EXTERNAL STANDARD	_____	_____
BLANK TEST	_____	_____
INTERNAL STANDARD	_____	_____
EXTERNAL STANDARD	_____	_____

REF: _____
DATE: _____
TIME: _____

Operator Signature

TPR L.P. Quinn

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE LABORATORY, MOBILE
BAC DATAMASTER SERIAL NUMBER 204312
494-03-14

TESTING OFFICER:
AGENCY:
OFFICER ID#:
PERMIT NUMBER:
EXPIRATION DATE:
MISCELLANEOUS DATA:

BLANK TEST	_____	_____
INTERNAL STANDARD	_____	_____
EXTERNAL STANDARD	_____	_____

Operator Signature

TPR L.P. Quinn

Face This Side Down - This Edge In First

Def

BAC DataMaster Evidence Ticket

MISSOURI STATE LABORATORY
BAC DATA MASTER
09/27/14
01400

IDENTIFICATION LABEL

COMPONENT	UNIT
PROBATION	UNIT
RECEIVED	UNIT
AMPLE COMPACT	UNIT
CLUB DETECTOR	UNIT
PAINT	UNIT
PLATE	UNIT
DEVELOPER	UNIT
ELECTRIC	UNIT
COMPACT DETECTOR	UNIT
CLUB DETECTOR	UNIT

PREVIOUS FILE

MISSOURI STATE LABORATORY
BAC DATA MASTER
09/27/14
01400

Operator Signature

TR L.P. Quinn