



STATE PUBLIC HEALTH LABORATORY
BREATH ALCOHOL PROGRAM
DATAMASTER MAINTENANCE REPORT

RECEIVED 3/5/14-CD REPORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 15 days).
Complete this report whenever the instrument is serviced or repaired and whenever it is placed in service.
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

REVIEWED

By Carol Day at 4:06 pm, Mar 31, 2014

DATAMASTER SN
204136NAME OF AGENCY
Missouri State Highway PatrolDATE OF INSPECTION
02/28/2014

LOCATION OF INSTRUMENT (STREET AND CITY)

Arnold P. D., 2101 Jeffco Blvd., Arnold, Missouri 63010

TIME OF INSPECTION
5:29 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.

DIAGNOSTIC CHECK (PRINTOUT ATTACHED) DATE AND TIME (from printout) 02/28/14 1745

COMPUTER DETECTOR

PROGRAM FILTERS

HEATERS SAMPLE CHAMBER 49 °C QUARTZ STANDARD

FLOW DETECTOR CALIBRATION

PUMP HIGH SPEED PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER Guth Laboratories, Inc. LOT # 13280 EXP. DATE 10/16/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34.2 °C SIMULATOR SN G-11039 EXP. DATE 04-16-14

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 → .101 TEST 2 → .101 TEST 3 → .101

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) <u>1</u>	(.10-.14) <u>2</u>	(.15-.19)	OVER .19 <u>1</u>
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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).

INSPECTING OFFICERSIGNATURE
Cpl. A.R. Flannery #551PRINT FULL NAME
Cpl. Allen R. FlanneryTYPE II PERMIT NUMBER/EXPIRATION DATE
220147/06-26-2014TELEPHONE NUMBER
(636) 300-2800

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: 717-664-6170

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.

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204136

02/28/14
17:45

--- 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:;<=>?@ABCDEFGHIJKL
MNOPQRSTUVWXYZ[\]^_`abcde fghijklmnop
qrs tuvwxyz{|}~

Operator Signature *Ch. A. R. Flannery #551*

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204136

02/28/14

ARREST TIME: 16:00

SUBJECT NAME:

TEST/JOHAN/Q

DOB: 12/25/64. SEX: M

STATE/D.L.: MO/987654321

ARRESTING OFFICER:

FLANNERY/ALLEN/R

OFFICER I.D.: 551

TESTING OFFICER:

FLANNERY/ALLEN/R

OFFICER I.D.: 551

PERMIT NUMBER: 220147

EXPIRATION DATE: 06/26/14

MISCELLANEOUS DATA:

RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST .000 17:49

INTERNAL STANDARD VERIFIED 17:49

RADIO INTERFERENCE

Operator Signature *Ch. A. R. Flannery #551*

2398-02

**BAC DataMaster
Evidence Ticket**

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204136
02/28/14

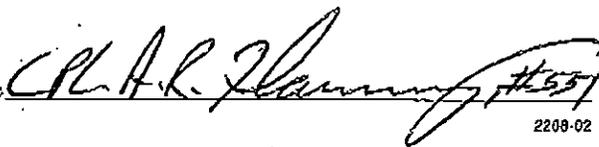
TESTING OFFICER:
FLANNERY/ALLEN/R
OFFICER I.D.: 551
PERMIT NUMBER: 220147
EXPIRATION DATE: 06/26/14
MISCELLANEOUS DATA:
CALIBRATION TEST

--- SUPERVISOR MODE ---

BLANK TEST	.000	18:14
INTERNAL STANDARD	VERIFIED	18:14
EXTERNAL STANDARD	.101	18:14
BLANK TEST	.000	18:15
EXTERNAL STANDARD	.101	18:16
BLANK TEST	.000	18:16
EXTERNAL STANDARD	.101	18:17
BLANK TEST	.000	18:17

n = 3
SIM. = .1
AVG. = .101

Operator Signature



DEPARTMENT OF HEALTH



PERMIT
TYPE II



ALLEN R FLANNERY

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 06/26/2012

Number 220147

Expires 06/26/2014

MO 880-0771 (7-83)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-85)