

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



DATAMASTER MAINTENANCE REPORT

RECEIVED REPORT #0
 By Carol Day at 9:28 am, May 12, 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 204142 / INV 127252	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 05/02/2014
LOCATION OF INSTRUMENT (STREET AND CITY) Washington County Sheriff's Office 116 W. High St. Potosi		TIME OF INSPECTION 8:00 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) 05/02/2014 20:00
<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 Laboratories Inc.</u> LOT # <u>13280</u> EXP. DATE <u>10/16/2015</u>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34.10</u> °C SIMULATOR SN <u>G11081</u> EXP. DATE <u>03/03/2015</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 → .100	TEST 2 → .100	TEST 3 → .100
---------------	---------------	---------------

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)	2	(.15-.19)	0	OVER .19	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 TPR <i>B.M. Beard</i>	PRINT FULL NAME Trooper B. M. Beard
TYPE II PERMIT NUMBER/EXPIRATION DATE 240043 03/07/2016	TELEPHONE 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.**

080 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-564-6470

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 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.

**BAC DataMaster
Evidence Ticket**

**BAC DataMaster
Evidence Ticket**

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204142
05/02/14

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204142
05/02/14
20:00

TESTING OFFICER:
BEARD/B/M
OFFICER I.D.: 254
PERMIT NUMBER: 240043
EXPIRATION DATE: 03/07/16
MISCELLANEOUS DATA:

--- 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

--- SUPERVISOR MODE ---

BLANK TEST .000 20:27
INTERNAL STANDARD VERIFIED 20:27
EXTERNAL STANDARD .100 20:28
BLANK TEST .000 20:28
EXTERNAL STANDARD .100 20:29
BLANK TEST .000 20:30
EXTERNAL STANDARD .100 20:30
BLANK TEST .000 20:31

N = 3
--- SIM. = .1
--- AVS. = .1

PRINTER TEST
!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFGHIJ
KLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmnop
qrstuvwxyz{|}~"

Operator Signature

TPR B.M. Beard

Operator Signature

TPR B.M. Beard

**BAC DataMaster
Evidence Ticket**

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204142
05/02/14

ARREST TIME: 20:00
SUBJECT NAME:
RFI/TEST
DOB: 09/09/88 SEX: M
STATE/D.L.: MO/
ARRESTING OFFICER:
BEARD/B/M
OFFICER I.D.: 254
TESTING OFFICER:
SAME
OFFICER I.D.:
PERMIT NUMBER: 240043
EXPIRATION DATE: 03/07/16
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	20:39
INTERNAL STANDARD	VERIFIED	20:40
RADIO INTERFERENCE		

Operator Signature TPR B.M. Beard



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



**PERMIT
TYPE II**

BRYAN M BEARD

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 3/7/2014

NUMBER 240043

EXPIRES 3/7/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MOI 600-0771 (6-10)

LAB-4 (116-10)

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

INSTRUMENT OPERATOR CARD

This 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 BEARD, BRYAN
Permit No 240043
Date Issued 3/7/2014 Date Expires 3/7/2016