



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

REPORT #6

RECEIVED
 By Carol Day at 9:46 am, Sep 05, 2014

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days) or when 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 204149	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 08/29/2014
LOCATION OF INSTRUMENT (STREET AND CITY) Missouri 52, Tuscumbia		TIME OF INSPECTION 8:23 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) 08/29/2014 @ 20:23
<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, Inc. LOT # 13280 EXP. DATE 10/16/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN G11102 EXP. DATE 12/02/2014

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 • .096	TEST 2 • .097	TEST 3 • .099
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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)	1	(.10-.14)	0	(.15-.19)	0	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).

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME Kyle A. Schrage
TYPE II PERMIT NUMBER/EXPIRATION DATE 240109 03/11/2016	TELEPHONE NUMBER (573) 751-1000

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

MISSOURI STATE LABORATORY
BAC DATAMASTER SERIAL NUMBER: 204149
09/29/14

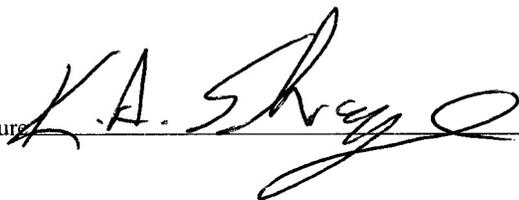
TESTING OFFICER:
SCHRAGE/KYLE/R
OFFICER I.D.: 1398
PERMIT NUMBER: 240159
EXPIRATION DATE: 03/31/16
MISCELLANEOUS DATA:

--- SUPERVISOR SIGNATURE ---

BLANK TEST	1.000	201.87
INTERNAL STANDARD	0.000	201.87
EXTERNAL STANDARD	1.000	201.86
BLANK TEST	1.000	201.87
EXTERNAL STANDARD	1.000	201.88
BLANK TEST	1.000	201.88
EXTERNAL STANDARD	1.000	201.86
BLANK TEST	0.000	201.86

N = 3
SIM. = .1
AVG. = .0973

Operator Signature



Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 294149
GROUP # 1#
28123

--- DIAGNOSTIC CHECK ---

COMPUTER:	OK
PROGRAM (84-07-2025):	OK
HEATERS	
SAMPLE CHAMBER:	OK
FLOW DETECTOR:	OK
PUMP	
HIGH SPEED:	OK
DETECTOR:	OK
FILTERS:	OK
QUARTZ STANDARD:	OK
CALIBRATION:	OK

PRINTED BY:
 !"#\$%&'()*+,-./:;<=>?@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 [\] ^ _ ` { | } ~
 HIJKLMNOPQRSTUVWXYZ[\] ^ _ ` { | } ~
 pqrstuvwxyz{|}~

Operator Signature K.A. Shroyer

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204049
08/29/14

ARREST TIME: 09145
SUBJECT NAME:
TEST
DOB: 09/09/99 SEX: M
STATE/D.L.L.: MO-123456
ARRESTING OFFICER:
TEST
OFFICER I.D.: 000
TESTING OFFICER:
SCHRAGE/KYLE/A
OFFICER I.D.: 1390
PERMIT NUMBER: 240189
EXPIRATION DATE: 08/31/16
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 .001
INTERNAL STANDARD 9500000 10000
RADIO INTERFERENCE

Operator Signature





GUTH LABORATORIES, INC.

890 NORTH 67th STREET • HARRISBURG, PA 17111-4811 • TELEPHONE: 717-664-6470

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 +/- 0.2°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.



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

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PERMIT
TYPE II
KYLE A SCHRAGE

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 3/11/2014

NUMBER 240109

EXPIRES 3/11/2016

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 SCHRAGE, KYLE
 Permit No 240109
 Date Issued 3/11/2014 Date Expires 3/11/2016