



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

received 5/6/14-cd

REPORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 30 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.

**REVIEWED**  
 By Carol Day at 2:00 pm, May 19, 2014

DATAMASTER SN 204191	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 04/29/2014
LOCATION OF INSTRUMENT (STREET AND CITY) Newton County Sheriffs Department, Neosho		TIME OF INSPECTION 9:25 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) 04/29/2014 @ 2127 hours
<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

<input checked="" type="checkbox"/> INDICATOR LIGHTS
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER Guth Laboratories LOT # 13280 EXP. DATE 10/16/2015

<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD3143 EXP. DATE 01/16/2015
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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)

<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 * .100	TEST 2 * .101	TEST 3 * .102
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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	6	(0-.04)	0	(.05-.09)	0	(.10-.14)	1	(.15-.19)	1	OVER .19	1
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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 Jeffrey T Day
TYPE / PERMIT NUMBER / EXPIRATION DATE 230049 / 02/08/2015	TELEPHONE NUMBER (417) 895-6868

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.**

590 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 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%.

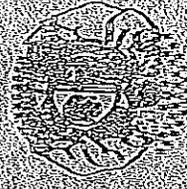
The alcohol and water used in this solution were free of test interfering substances.

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.*



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

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PERMIT  
TYPE II

JERRY T DAY

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

**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 568.131 through 568.136, RSMo

DATE 02/08/2015

NUMBER 230019

EXPIRES 02/09/2015

HC 600.031 (03/01)

*W. W. [Signature]*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Shad [Signature]*

Acting Director  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

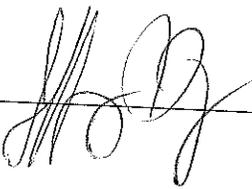
MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 284191  
04/29/14

TESTING OFFICER:  
DAY/MT  
OFFICER I.D.# 363  
PERMIT NUMBER 28819  
EXPIRATION DATE 06/06/15  
MISCELLANEOUS DATA:

----- SUPERVISOR NAME -----

BLANK TEST	.000	21141
INTERNAL STANDARD	VERIFIED	21142
EXTERNAL STANDARD	.100	21143
BLANK TEST	.000	21144
EXTERNAL STANDARD	.100	21145
BLANK TEST	.000	21146
EXTERNAL STANDARD	.100	21147
BLANK TEST	.000	21148

N = 4  
SIM = 1  
NMBL = 1.001

Signature 

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 284191  
04/29/14

ARREST TITLE: 06101  
SUBJECT NAME:  
TEST:  
DOB: 01/01/80 SEX: M  
STATE/D.L.#: NA/NA  
ARRESTING OFFICER:  
NA  
OFFICER I.D.# NA  
TESTING OFFICER:  
DAY/MT  
OFFICER I.D.# 363  
PERMIT NUMBER: 28819  
EXPIRATION DATE 06/06/15  
MISCELLANEOUS DATA:  
REF: TEST

----- BREATH ANALYSIS -----

PROB INTERFERENCE

Operator Signature 