

1204



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

DATAMASTER MAINTENANCE REPORT

received 7/4/14-cc REPORT #6

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.

REVIEWED
By Carol Day at 10:04 am, Jul 14, 2014

DATAMASTER SN 204192	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 06/27/2014
LOCATION OF INSTRUMENT (STREET AND CITY) McDonald County Jail, Pineville		TIME OF INSPECTION 11:28 am

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) 06/27/14 11:28
<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 <u>GUTH LABORATORIES, INC.</u> LOT # <u>13290</u> EXP. DATE <u>10/29/2015</u>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34.0</u> °C SIMULATOR SN <u>SD3143</u> EXP. DATE <u>01/16/2015</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 <input checked="" type="checkbox"/> .096	TEST 2 <input checked="" type="checkbox"/> .097	TEST 3 <input checked="" type="checkbox"/> .098
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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	1	(0-.04)	0	(.05-.09)	2	(.10-.14)	7	(.15-.19)	6	OVER .19	4
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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).

NO ALTERATION OR MODIFICATION WAS MADE TO THIS INSTRUMENT.

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME Josey J. Long
TYPE II PERMIT NUMBER/EXPIRATION DATE 240062 03/07/2016	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 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°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.

Face This Side Down - This Edge In First

BAC DataMaster

Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATA MASTER SERIAL NUMBER 204192
06/27/14

11:28

--- DIAGNOSTIC CHECK ---

PUTER: OKAY
GRAM (04-07-2009): OKAY
TERS
PLE CHAMBER: 50C
W DETECTOR: OKAY
R
H SPEED: OKAY
ECTOR: OKAY
TERS: OKAY
RTZ STANDARD: OKAY
IBRATION: OKAY

PRINTER TEST
#%&'()*+,-./0123456789:;<=>?@ABCDE
FGHIJKLMNOPQRSTUVWXYZ[\]^_`abcdefg
hijklmnopqrstuvwxyz{|}~

Signature
Printed on recycled paper with 50% recycled fibers

Face This Side Down - This Edge In First

BAC DataMaster

Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATA MASTER SERIAL NUMBER 204192
06/27/14

TESTING OFFICER:
LONG/JJ

OFFICER I.D.: 1282
PERMIT NUMBER: 240062
EXPIRATION DATE: 03/07/16
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST
INTERNAL STANDARD .000
EXTERNAL STANDARD .096
BLANK TEST .000
EXTERNAL STANDARD .097
BLANK TEST .000
EXTERNAL STANDARD .098
BLANK TEST .000

N = 3
SIM. = .1
RMG. = .097

Operator Signature
Printed on recycled paper with 50% recycled fibers

Face This Side Down - This Edge In First

BAC DataMaster

Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATA MASTER SERIAL NUMBER 204192
06/27/14

PREST TIME: 11:00

SUBJECT NAME:

TEST
DOB: 01/01/01 SEX: M
STATE/D.L.: MO/
ARRESTING OFFICER:
LONG/JJ

OFFICER I.D.: 1282
TESTING OFFICER:
LONG/JJ

OFFICER I.D.: 1282
PERMIT NUMBER: 240062
EXPIRATION DATE: 03/07/16
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000
INTERNAL STANDARD .000
RADIO INTERFERENCE .000
VERIFIED 11:39
11:39

Operator Signature
Printed on recycled paper with 50% recycled fibers



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



**PERMIT
TYPE II**

JOSEY J LONG

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, ALCO-SENSOR IV W/PRINTER

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 240062

EXPIRES 3/7/2016

MO-560-DZ71-(6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 alcohol content in breath form of expired air in Missouri.



Operator LONG, JOSEY
Permit No 240062
Date Issued 3/7/2014 Date Expires 3/7/2016