



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

RECEIVED

By Carol Day at 12:45 pm, Dec 23, 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 206011	NAME OF AGENCY Seneca Police Department	DATE OF INSPECTION 12/20/2014
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LOCATION OF INSTRUMENT (STREET AND CITY) 517 Oneida St. Seneca	TIME OF INSPECTION 1:29 am
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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) 12/20/2014 01:29
<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

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER Guth Laboratories LOT # 14200 EXP. DATE 08/05/2016

SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN 094948 EXP. DATE 08/14/2015

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 ← .097	TEST 2 → .098	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)	0	(.10-.14)	0	(.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 Rusty Russell
TYPE II PERM T NUMBER/EXPIRATION DATE 230124 06/12/2015	TELEPHONE NUMBER (417) 776-8158

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.

580 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14200 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on August 6, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1213% (w/vol) ethyl alcohol. The expiration date for this lot number is August 5, 2016 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

STATE OF MISSOURI
SENECA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 206011
12/20/14
81129

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS

SAMPLE CHAMBER: 50c

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!@#\$%^&'()*+,-./0123456789:;=>?@ABCDEFGHI
 HIJKLMNOPQRSTUVWXYZ[\]^_`ab cdefghijklmno
 pqrstu vwxyz{|}~?@

Operator Signature



2208-02

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
SENECA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 206011
12/20/14

TESTING OFFICER:
 RUSSELL/RUSTY
 OFFICER I.D.: 505
 PERMIT NUMBER: 230124
 EXPIRATION DATE: 06/12/15
 MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	01:31
INTERNAL STANDARD	VERIFIED	01:31
EXTERNAL STANDARD	.097	01:31
BLANK TEST	.000	01:32
EXTERNAL STANDARD	.098	01:32
BLANK TEST	.000	01:33
EXTERNAL STANDARD	.099	01:33
BLANK TEST	.000	01:34

N = 3
 SIM. = .1
 AVG. = .098

Operator Signature



2208-02

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
SENECA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 206011
12/20/14

ARREST TIME: 00:00

SUBJECT NAME:

RFI

DOB: 12/12/12 SEX: M

STATE/D.L.: MO/1234567

ARRESTING OFFICER:

RUSSELL/RUSTY

OFFICER I.D.: 505

TESTING OFFICER:

RUSSELL/RUSTY

OFFICER I.D.: 505

PERMIT NUMBER: 230124

EXPIRATION DATE: 06/12/15

MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	01:37
INTERNAL STANDARD	VERIFIED	01:37
SUBJECT SAMPLE	.000	01:37
RADIO INTERFERENCE		

Operator Signature





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

2

**PERMIT
 TYPE II**

RUSTY RUSSELL

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

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 FISMd.

DATE 06/12/2013
 NUMBER 230124
 EXPIRES 06/12/2015

W. A. V. [Signature]

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Shelley [Signature]

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 680-0771 (5-10)

LAB-1 (P&10)