



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

**RECEIVED**  
 By Carol Day at 8:54 am, Nov 04, 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 931124	NAME OF AGENCY Bowling Green Police Department	DATE OF INSPECTION 11/01/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 15 West Church Street, Bowling Green		TIME OF INSPECTION 0:38 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) 11-01-2014, 00:38
<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 48 °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 Labs, Inc. LOT # 14200 EXP. DATE 08/05/2016

SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD 2507 EXP. DATE 01/16/2015

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 → .096	TEST 2 → .097	TEST 3 → .097
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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)	1	(.15-.19)	2	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).

Simulator checked on January 16, 2014 by Dan Lucas--MO Safety Center

**INSPECTING OFFICER**

SIGNATURE ▶ <i>R.E. Owen #511</i>	PRINT FULL NAME R.E. Owen
TYPE II PERMIT NUMBER/EXPIRATION DATE 240346 09/23/2016	TELEPHONE NUMBER (573) 324-3200

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

STATE OF MISSOURI  
BOWLING GREEN POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 931124  
11/01/14

ARREST TIME: 23:00  
SUBJECT NAME:  
SAMPLE  
DOB: 01/01/01 SEX: M  
STATE/CL: IL/AAA  
ARRESTING OFFICER:  
QWEN/R/E  
OFFICER I.D.: 511  
TESTING OFFICER:  
SAME  
OFFICER I.D.: 511  
PERMIT NUMBER: 240346  
EXPIRATION DATE: 09/23/16  
MISCELLANEOUS DATA:  
RFI CHECK

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
BOWLING GREEN POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 931124  
11/01/14

TESTING OFFICER:  
QWEN/R/E  
OFFICER I.D.: 511  
PERMIT NUMBER: 240346  
EXPIRATION DATE: 09/23/16  
MISCELLANEOUS DATA:  
MONTHLY MAINTENANCE

--- SUPERVISOR MODE ---

BLANK TEST	.000	00:42
INTERNAL STANDARD	VERIFIED	00:42
EXTERNAL STANDARD	.096	00:43
BLANK TEST	.000	00:43
EXTERNAL STANDARD	.097	00:44
BLANK TEST	.000	00:44
EXTERNAL STANDARD	.097	00:45
BLANK TEST	.000	00:45

N = 3  
SIM. = .1  
AVG. = .0966

## Evidence Ticket

STATE OF MISSOURI  
BOWLING GREEN POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 931124  
11/01/14  
00:38

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY  
PROGRAM (04-07-2009): OKAY  
HEATERS  
SAMPLE CHAMBER: 48c  
FLOW DETECTOR: OKAY  
PUMP  
HIGH SPEED: OKAY  
DETECTOR: OKAY  
FILTERS: OKAY  
QUARTZ STANDARD: OKAY  
CALIBRATION: OKAY

PRINTER TEST

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

00:51  
00:52

.000  
VERIFIED

INTERNAL STANDARD  
NO INTERFERENCE

*R.E. Owen #511*

nature



## GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-564-5470

### 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.*



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



**PERMIT**  
**TYPE II**  
**RODNEY E OWEN**

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 RSMo.

DATE 9/23/2014

NUMBER 240346

EXPIRES 9/23/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES



**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** OWEN, RODNEY  
**Permit No** 240346  
**Date Issued** 9/23/2014    **Date Expires** 9/23/2016