



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

RECEIVED 3/5/14-CD
 REPORT #6

REVIEWED
 By Carol Day at 3:49 pm, Mar 31, 2014

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.

DATAMASTER SN 940113	NAME OF AGENCY Bernie Police Department	DATE OF INSPECTION 02/22/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 206 West Crumb Ave, Bernie MO.		TIME OF INSPECTION 7:00 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) 02/22/2014- 0700
<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
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER <u>Guth Labs</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</u> °C	SIMULATOR SN <u>SD2744</u> EXP. DATE <u>03/12/2014</u>
<input checked="" type="checkbox"/> 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 ➤ .099	TEST 2 ➤ .095	TEST 3 ➤ .095
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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)	1	(.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 Justin K. Allen
TYPE II PERMIT NUMBER/EXPIRATION DATE 220228 09/07/2014	TELEPHONE NUMBER (573) 293-4454

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 87th 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 $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$, this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L \pm 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.

**BAC DataMaster
Evidence Ticket**

**BAC DataMaster
Evidence Ticket**

BERNIE PD

BERNIE PD

BAC DATAMASTER SERIAL NUMBER 940113
02/22/14
07#00

BAC DATAMASTER SERIAL NUMBER 940113
02/22/14

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM (04-07-2009): OKAY
HEATERS
SAMPLE CHAMBER: 49c
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

TESTING OFFICER:
ALLEN/JUSTIN/K
OFFICER I.D.: 790
PERMIT NUMBER: 220228
EXPIRATION DATE: 09/07/14
MISCELLANEOUS DATA:
MONTHLY MAINT

--- SUPERVISOR MODE ---

BLANK TEST	.000	06:55
INTERNAL STANDARD	VERIFIED	06:55
EXTERNAL STANDARD	.099	06:55
BLANK TEST	.000	06:56
EXTERNAL STANDARD	.095	06:57
BLANK TEST	.000	06:58
EXTERNAL STANDARD	.095	06:58
BLANK TEST	.000	06:59

N = 3
SIM. = .1
AVG. = .0963

PRINTER TEST

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

Operator Signature

Operator Signature

BAC DataMaster
Evidence Ticket

BERNIE PD

BAC DATAMASTER SERIAL NUMBER 940113
02/22/14

ARREST TIME: 04:30
SUBJECT NAME:
RADIO/FREQUENCY/TEST
DOB: 11/11/11 SEX: M
STATE/D.L.: MO/N/A
ARRESTING OFFICER:
N/A
OFFICER I.D.: N/A
TESTING OFFICER:
ALLEN/JUSTIN/K
OFFICER I.D.: 790
PERMIT NUMBER: 220228
EXPIRATION DATE: 09/07/14
MISCELLANEOUS DATA:
N/A
N/A

--- BREATH ANALYSIS ---

--- RADIO INTERFERENCE ---

Operator Signature _____



State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



JUSTIN K ALLEN

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 09/07/2012

Number 220228

Expires 09/07/2014

MO 58D-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)