



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

RECEIVED REPORT # 6
 By Carol Day at 4:26 pm, Apr 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 940164	NAME OF AGENCY STRAFFORD POLICE DEPT	DATE OF INSPECTION 04/14/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 113 E. PINE ST. STRAFFORD, MO 65757		TIME OF INSPECTION 3:00 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) 04/14/2014 @ 1500
<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 GUTH LABS INC LOT # 14030 EXP. DATE 01/20/2016
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 34.00 °C SIMULATOR SN DR5379 EXP. DATE 02/12/2015

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 → .104	TEST 2 → .104	TEST 3 → .103
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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)	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 JUSTHAN I WEBSTER
TYPE II PERMIT NUMBER/EXPIRATION DATE 230036 02/27/2015	TELEPHONE NUMBER (417) 736-4000

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.

690 NORTH 07th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14030 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 22, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1215% (w/vol) ethyl alcohol. The expiration date for this lot number is January 20, 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.



Simulator Calibration Report

This calibration report is to certify the alcohol reference simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance with the standards set by the Missouri Department of Health and Senior Services
Rules and Regulations: 19CSR 25-30.

Checked: 2/13/2014 Expires: 02/12/2015
Digital Therm. SN:093752 Temp:33.98
MSC Tech:RW
Agency: STRAFFORD PD
DR5379



Tested By: _____

ROBERT WELSH

Date: _____

02/13/2014

Contact: Missouri Safety Center

Breath Alcohol Instrument Training Program

660-543-4834

**BAC DataMaster
Evidence Ticket**

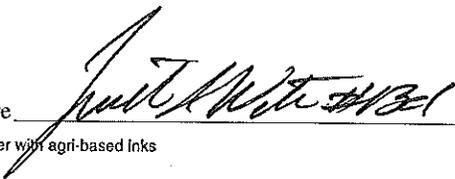
STATE OF MISSOURI
STRAFFORD POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 948164
04/14/14

ARREST TIME: 14:45
SUBJECT NAME:
RFI/TEST
DOB: 10/10/79 SEX: M
STATE/D.L.: MO/RFI TEST
ARRESTING OFFICER:
WEBSTER/JUSTMAN
OFFICER I.D.: 1001
TESTING OFFICER:
WEBSTER/JUSTMAN
OFFICER I.D.: 1001
PERMIT NUMBER: 230006
EXPIRATION DATE: 02/27/15
MISCELLANEOUS DATA:
RFI TEST
RFI TEST

---- BREATH ANALYSIS ----

BLANK TEST .000 15:17
INTERNAL STANDARD VERIFIED 15:17
RADIO INTERFERENCE

Signature 
Printed on recycled paper with agri-based inks CMSU 2208-02

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
STRAFFORD POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 948164
04/14/14

TESTING OFFICER:
WEBSTER/JUSTMAN
OFFICER I.D.: 1001
PERMIT NUMBER: 230006
EXPIRATION DATE: 02/27/15
MISCELLANEOUS DATA:
MAINTENANCE

---- SUPERVISOR CODE ----

BLANK TEST .000 15:02
INTERNAL STANDARD VERIFIED 15:02
EXTERNAL STANDARD .104 15:03
BLANK TEST .000 15:03
EXTERNAL STANDARD .104 15:04
BLANK TEST .000 15:04
EXTERNAL STANDARD .103 15:05
BLANK TEST .000 15:05

N = 0
SIM. = .1
AVG. = .1006

Operator Signature 
Printed on recycled paper with agri-based inks CMSU 2208-02

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
STAFFORD POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 240164
04/14/16
15:00

DIAGNOSTIC CHECK

COMPUTER:	OKAY
PROGRAM (04-07-0000):	OKAY
HEATERS	
SAMPLE CHAMBER:	49c
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST

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

Operator Signature





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

2

PERMIT
TYPE II

JUSTHAN I WEBSTER

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 02/27/2013

NUMBER 230036

EXPIRES 02/27/2015

W. Webster

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Paul Webster

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 590-0771 (8-10)

LAB-4 (R6-10)