



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

RECEIVED
 By Carol Day at 1:15 pm, Jan 16, 2014, PORT #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.

DATAMASTER SN 940208	NAME OF AGENCY Missouri State Highway Patrol	DATE OF INSPECTION 01/04/2014
LOCATION OF INSTRUMENT (STREET AND CITY) Texas County Sheriff's Department, Houston, Missouri 65483		TIME OF INSPECTION 0:15 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) 12/30/2013 7:26 p.m.
<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 Laboratories, Inc.	LOT # 13280 EXP. DATE 10/16/2015
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 33.99 °C	SIMULATOR SN 1324 EXP. DATE 01/22/2014
<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 <input checked="" type="checkbox"/> .099%	TEST 2 <input checked="" type="checkbox"/> .100%	TEST 3 <input checked="" type="checkbox"/> .102%
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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).

This instrument is operating satisfactorily within the guidelines set by the Missouri Department of Health, Guth Laboratories Inc., 100% solution, Lot #13280, Bottle # 1448, expiration date 10/16/2015. This instrument was placed into service due to the failure of the original instrument because of printer failure.

INSPECTING OFFICER	
SIGNATURE <i>Cpl. D. B. Pounds</i>	PRINT FULL NAME Corporal Dale B. Pounds
TYPE II PERMIT NUMBER/EXPIRATION DATE 220325 09/28/2014	TELEPHONE NUMBER (417) 469-3121

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 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13280 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 18, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1217% (w/vol) ethyl alcohol. The expiration date for this lot number is October 16, 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.

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



DALE B POUNDS

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 09/28/2012

Number 220325

Expires 09/28/2014

Director of State Public Health Laboratory

Director, Department of Health

BAC DataMaster
Evidence Ticket

BAC DataMaster
Evidence Ticket

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATA MASTER SERIAL NUMBER 940208
01/04/14
00:15

MISSOURI STATE HIGHWAY PATROL
BAC DATA MASTER SERIAL NUMBER 940208
01/04/14

MISSOURI STATE HIGHWAY PATROL
BAC DATA MASTER SERIAL NUMBER 940208
01/04/14

--- DIAGNOSTIC CHECK ---

COMPUTER: OKRY
PROGRAM (04-07-2009): OKRY
ENTERS: 49C
AMPLE CHAMBER:
LOW DETECTOR: OKRY
UMP: OKRY
ISH SPEED: OKRY
EJECTOR: OKRY
ILTERS: OKRY
UART2 STANDARD: OKRY
ALIBRATION: OKRY

TESTING OFFICER:
POUNDS/D/B
OFFICER I.D.: 984
PERMIT NUMBER: 220325
EXPIRATION DATE: 09/28/14
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST .000 00:17
INTERNAL STANDARD VERIFIED 00:17
EXTERNAL STANDARD .099 00:18
BLANK TEST .000 00:19
EXTERNAL STANDARD .100 00:19
BLANK TEST .000 00:22
EXTERNAL STANDARD .102 00:22
BLANK TEST .000 00:21

N = 3
SIM. = .1
RMG. = .1003

ARREST TIME: 00:01
SUBJECT NAME:
NELSON/TERRY/L
DOB: 09/08/62 SEX: M
STATE/D.L.: MO/123456789
ARRESTING OFFICER:
POUNDS/D/B
OFFICER I.D.: 984
TESTING OFFICER:
SAME

OFFICER I.D.: SAME
PERMIT NUMBER: 220325
EXPIRATION DATE: 09/28/14
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 00:24
INTERNAL STANDARD VERIFIED 00:24
RADIO INTERFERENCE

PRINTER TEST

!##\$%&'()*+,-./0123456789:;<=>?@A
IJKL MNOPQRSTUVWXYZ[\]^_`abcdefg h
ijklmnopqrstuvwxyz{|}~*

Signature *Cpl D.B. Pounds*

Operator Signature *Cpl D.B. Pounds*

Operator Signature *Cpl D.B. Pounds*