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

# DATAMASTER MAINTENANCE REPORT

REPORT #6

RECEIVED
By Carol Day at 12:22 pm, Oct 28, 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 | NAME OF AGENCY | DATE OF INSPECTION |
|---|---|---|
| 940442 | Waverly Police Department | 10/24/2014 |
| LOCATION OF INSTRUMENT (STREET AND CITY) | | TIME OF INSPECTION |
| 111 E. Kelling Waverly, MO. 64096 | | 8:48 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.

- ☑ DIAGNOSTIC CHECK (PRINTOUT ATTACHED) — DATE AND TIME (from printout) 10/24/14 8:51
- ☑ COMPUTER — ☑ DETECTOR
- ☑ PROGRAM — ☑ FILTERS
- ☑ HEATERS SAMPLE CHAMBER 49 °C — ☑ QUARTZ STANDARD
- ☑ FLOW DETECTOR — ☑ CALIBRATION
- ☑ PUMP HIGH SPEED — ☑ PRINTER
- ☑ INDICATOR LIGHTS
- ☑ SIMULATOR SOLUTION SUPPLIER Guth LOT # 14030 EXP. DATE 01/22/2016
- ☑ SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN 093752 EXP. DATE 07/24/2014
- ☑ 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 ☛ .099 | TEST 2 ☛ .099 | TEST 3 ☛ .099 |
|---|---|---|

- ☑ 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-.04) | (.05-.09) | (.10-.14) | (.15-.19) | OVER .19 |
|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 | 0 |

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).

Meets DOH Standards

**INSPECTING OFFICER**

| SIGNATURE | PRINT FULL NAME |
|---|---|
| Dale L. Cox | Dale L. Cox |
| TYPE II PERMIT NUMBER/EXPIRATION DATE | TELEPHONE NUMBER |
| 240036 02/11/2016 | (660) 259-3622 |

**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 67TH STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-6470

# 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.*

# BAC DataMaster
# Evidence Ticket

STATE OF MISSOURI
WAVERLY POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 940442
10/24/14

ARREST TIME: 08:00
SUBJECT NAME:
RFI/TEST
DOB: 01/14/81 SEX: M
STATE/D.L.: MO/123456789
ARRESTING OFFICER:
COX/DALE
OFFICER I.D.: 175
TESTING OFFICER:
COX/DALE
OFFICER I.D.: 175
PERMIT NUMBER: 240036
EXPIRATION DATE: 02/11/16
MISCELLANEOUS DATA:
RFI TEST

--- BREATH ANALYSIS ---

| | | |
|---|---|---|
| BLANK TEST | .000 | 09:06 |
| INTERNAL STANDARD | VERIFIED | 09:06 |
| RADIO INTERFERENCE | | |

Operator Signature

# BAC DataMaster
# Evidence Ticket

STATE OF MISSOURI
WAVERLY POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 940442
10/24/14
08:51

--- 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 |

PRINTER TEST

!"#$%&'()*+,-./0123456789:;<=>?@ABCDEFG
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmno
pqrstuvwxyz{|}→←

Operator Signature

# BAC DataMaster
# Evidence Ticket

STATE OF MISSOURI
WAVERLY POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 940442
10/24/14

TESTING OFFICER:
COX/DALE
OFFICER I.D.: 175
PERMIT NUMBER: 240036
EXPIRATION DATE: 02/11/16
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

| | | |
|---|---|---|
| BLANK TEST | .000 | 09:13 |
| INTERNAL STANDARD | VERIFIED | 09:13 |
| EXTERNAL STANDARD | .099 | 09:14 |
| BLANK TEST | .000 | 09:14 |
| EXTERNAL STANDARD | .099 | 09:15 |
| BLANK TEST | .000 | 09:15 |
| EXTERNAL STANDARD | .099 | 09:16 |
| BLANK TEST | .000 | 09:16 |

N = 3
SIM. = .1
AVG. = .099

Operator Signature

2208-02

STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES

BREATH ALCOHOL PROGRAM

2

# PERMIT

## TYPE II

## DALE L COX

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 2/11/2014

NUMBER 240036

EXPIRES 2/11/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (8-12)

LAB-4 (R5-10)

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

**INSTRUMENT OPERATOR CARD**

The above cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath from of expired air in Missouri.

Operator COX, DALE
Permit No 240036
Date Issued 2/11/2014 Date Expires 2/11/2016