



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

RECEIVED 3/19/14-CD

REVIEWED

REPORT #6

By Carol Day at 3:37 pm, Apr 01, 2014

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 30 days) after 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 950053	NAME OF AGENCY CENTRALIA POLICE DEPT.	DATE OF INSPECTION 3/11/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 1200 S. HOLDEN ST. WARRENSBURG		TIME OF INSPECTION 1204

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) 3/11/2014 1204
<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

INDICATOR LIGHTS **OK**

SIMULATOR SOLUTION SUPPLIER **GUTH** LOT # **13210** EXP. DATE **7/29/15**

SIMULATOR TEMP (34°C ± 0.2°C) **34.0** °C SIMULATOR SN **SD 3152** EXP. DATE **1/17/2015**

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 • .100	TEST 2 • .099	TEST 3 • .099
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PERFORM R.F.I. TEST (PRINTOUT ATTACHED) **OK**

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 —
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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).

**ADJUSTED VOLTAGES. REPLACED PRINTER RIBBON.
 VERIFIED CALIB.**

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME ROBERT WELSH
TYPE II PERMIT NUMBER/EXPIRATION DATE 230100 5/29/2015	TELEPHONE NUMBER 660-543-4597

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: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **13210** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **July 31, 2013**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1216%** (w/vol) ethyl alcohol. The expiration date for this lot number is **July 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.



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

2

**PERMIT
TYPE II**

ROBERT W WELSH

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, INTOX DMT, INTOXILYZER 5000,
INTOXILYZER 8000, ALCO-SENSOR IV WITH PRINTER, EC/IR II**

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 05/29/2013

NUMBER 230100

EXPIRES 05/29/2015

W. Welsh

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Paul Voshell

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

MO 580-0771 (5-10)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
CENTRALIA POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 950053
03/11/14

ARREST TIME: 10:00
SUBJECT NAME:
OWLET/DWYER/EASY
DOB: 01/01/67 SEX: F
STATE/D.L.: MO/1234567890
ARRESTING OFFICER:
M

OFFICER I.D.: W
TESTING OFFICER:
WELSH/R
OFFICER I.D.:
PERMIT NUMBER: 230100
EXPIRATION DATE: 05/29/15
MISCELLANEOUS DATA:
N
N

--- BREATH ANALYSIS ---

BLANK TEST	.000	12:17
INTERNAL STANDARD	VERIFIED	12:17
SUBJECT SAMPLE	.000	12:17
BLANK TEST	.000	12:18

OPERATOR SIGNATURE



Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1000, CENTRALIA, MO 64601

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
CENTRALIA POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 950053
03/11/14

ARREST TIME: 09:00
SUBJECT NAME:
RFI/TEST
DOB: 01/01/01 SEX: M
STATE/D.L.: MO/1234567890
ARRESTING OFFICER:
M

OFFICER I.D.: W
TESTING OFFICER:
WELSH/R
OFFICER I.D.:
PERMIT NUMBER: 230100
EXPIRATION DATE: 05/29/15
MISCELLANEOUS DATA:
N
N

--- BREATH ANALYSIS ---

BLANK TEST	.000	12:21
INTERNAL STANDARD	VERIFIED	12:21
RATIO INTERFERENCE		

OPERATOR SIGNATURE



Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1000, CENTRALIA, MO 64601

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
CENTRALIA POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 950053
03/11/14

TESTING OFFICER:

WELSH/R

OFFICER I.D.#

PERMIT NUMBER: 230100

EXPIRATION DATE: 05/29/15

MISCELLANEOUS DATA:

N
N

--- SUPERVISOR MODE ---

BLANK TEST	.000	12:07
INTERNAL STANDARD	VERIFIED	12:07
EXTERNAL STANDARD	.100	12:07
BLANK TEST	.000	12:08
EXTERNAL STANDARD	.099	12:08
BLANK TEST	.000	12:09
EXTERNAL STANDARD	.099	12:09
BLANK TEST	.000	12:10

N = 3

SIM. = .1

AVG. = .0993

OPERATOR SIGNATURE



Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44801

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
CENTRALIA POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 950053
03/11/14
12:04

--- 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:;<=>?@ABCDEFGHIJ
KLMNOPQRSTUVWXYZ[\]^_`abcdefgijklmnop
q-rstuvwxyz{|}~*

OPERATOR SIGNATURE



Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44801



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 25-30.051 (4).

Checked: 03/11/2014 Expires: **03/11/2015**
MSC Tech: RW
Temp: 34.03 Digital Therm. SN: 093752
Agency: Centralia Police Department
SD 2269



Technician Printed Name:

ROBERT WELSH

Technician Signature:

Date:

03/11/2014

Contact: Missouri Safety Center

Breath Alcohol Instrument Training Program

660-543-4834