



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

**RECEIVED**  
 By Carol Day at 3:37 pm, Jan 06, 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 950081	NAME OF AGENCY Butler Police Dept.	DATE OF INSPECTION 01/01/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 309 N. Fulton Butler, MO 64730		TIME OF INSPECTION 7:29 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) 01/01/2014 19:29
<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 _____ 50 °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

SIMULATOR SOLUTION SUPPLIER Guth Laboratories Inc. LOT # 13010 EXP. DATE 01/09/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD2302 EXP. DATE 02/20/2014

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  .100	TEST 2  .100	TEST 3  .100
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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	1	(.0-.04)	0	(.05-.09)	1	(.10-.14)	0	(.15-.19)	2	OVER .19	1
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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).

Maintenance completed satisfactorily - instrument returned to service

<b>INSPECTING OFFICER</b>	
SIGNATURE 	PRINT FULL NAME Mark A. Frost
TYPE II PERMIT NUMBER/EXPIRATION DATE 230063 04/23/2015	TELEPHONE NUMBER (660) 679-6131

**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

# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
BUTLER POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950081  
01/01/14

TESTING OFFICER:  
FROST/MARK/A  
OFFICER I.D.: 39  
PERMIT NUMBER: 230063  
EXPIRATION DATE: 04/23/15  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	19:33
INTERNAL STANDARD	VERIFIED	19:33
EXTERNAL STANDARD	.100	19:33
BLANK TEST	.000	19:34
EXTERNAL STANDARD	.100	19:34
BLANK TEST	.000	19:35
EXTERNAL STANDARD	.100	19:36
BLANK TEST	.000	19:36

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

 CPL #39

Operator Signature

Printed on recycled paper with agri-based inks

CMSU 2208-02

# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
BUTLER POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950081  
01/01/14  
19:29

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-07-2009): OKAY

HEATERS

SAMPLE CHAMBER: 50c

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

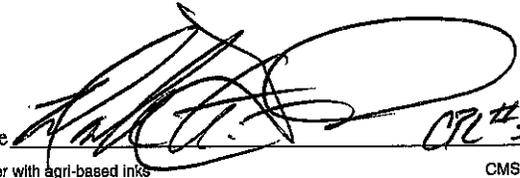
FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

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

 CPL #39

Operator Signature

Printed on recycled paper with agri-based inks

CMSU ;

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
BUTLER POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950081  
01/01/14

ARREST TIME: 19:00  
SUBJECT NAME:  
RFI/SOBER/TEST  
DOB: 02/05/86      SEX: F  
STATE/D.L.: MO/P0720316630  
ARRESTING OFFICER:  
FROST  
OFFICER I.D.: 39  
TESTING OFFICER:  
FROST  
OFFICER I.D.: 39  
PERMIT NUMBER: 230063  
EXPIRATION DATE: 04/23/15  
MISCELLANEOUS DATA:  
SOBER TEST  
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	19:41
INTERNAL STANDARD	VERIFIED	19:41
SUBJECT SAMPLE	.000	19:41
RADIO INTERFERENCE		

Operator Signature

Printed on recycled paper with age-based inks

 *OP#39*  
CMSU 2208-02



## GUTH LABORATORIES, INC.

680 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-664-6470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13010 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 14, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1218% (w/vol) ethyl alcohol. The expiration date for this lot number is January 9, 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 FNI22211-02 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

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**PERMIT  
TYPE II**

**MARK A FROST**

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 04/23/2013  
 NUMBER 230063  
 EXPIRES 04/23/2015

*W. Vesterly*

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*Paul Vesterly*

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

MO 590-0771 (6-10)