



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

RECEIVED
By Carol Day at 1:45 pm, Apr 01, 2014

REPORT #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 950090	NAME OF AGENCY Phelps County Sheriff's Dept.	DATE OF INSPECTION 3-31-14
LOCATION OF INSTRUMENT (STREET AND CITY) 500 W. 2ND Rolla, Mo 65401		TIME OF INSPECTION 2219

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) 3-31-14 2219
<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 LOT # 13010 EXP. DATE 1-9-15
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN 5D2275 EXP. DATE 1-29-15

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 .101
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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-.04) —	(.05-.09) —	(.10-.14) —	(.15-.19) 1	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).

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME Paul J. Lambert
TYPE II PERMIT NUMBER/EXPIRATION DATE 220164 7-6-14	TELEPHONE NUMBER 573-308-6213

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.**

560 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 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.

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MICHIGAN
MELBRO COUNTY CORRECTIONS DEPT

BAC DATA MASTER SERIAL NUMBER 950095
03/31/14

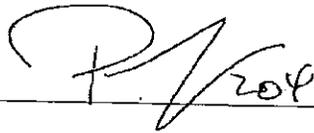
TESTING OFFICER:
LARRY W. GILLO
OFFICER ID#: 804
PERMIT NUMBER: 220164
EXPIRATION DATE: 07/06/14
HYDROLYSIS DATA:

--- SUPERVISOR WIDE ---

BLANK TEST	.800	22:23
INTERNAL STANDARD	VERIFIED	22:23
INTERNAL STANDARD	.120	22:24
BLANK TEST	.800	22:25
INTERNAL STANDARD	.120	22:25
BLANK TEST	.800	22:26
INTERNAL STANDARD	.101	22:26
BLANK TEST	.800	22:27

n = 3
Stn. = .1
Avg. = .1000

Operator Signature _____



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**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
POLICE COUNTY SHERIFFS DEPT

SWO NUMBER/ISSUE GENERAL NUMBER 000000
30/01/14

ARREST TIME: 21:00
SUSPECT NAME:
DOB: 01/01/88
SEX: M / HAIR: B / EYES: B
SYNOPSIS NO: 10007
ARRESTING OFFICER:
LAWRENCE PAUL J
OFFICER I.D. NO:
ISSUING OFFICER:
LAWRENCE PAUL J
OFFICER I.D. NO:
REPORT NUMBER: 00000
EXPIRATION DATE: 0000
MISCELLANEOUS INFO:

--- PRINTED NAME ---

ARREST OFFICER:

Operator Signature



State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



PAUL J LAMBERT

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 07/06/2012

Number 220164

Expires 07/06/2014

MO 556-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (87-88)