



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

RECEIVED
 By Carol Day at 2:22 pm, Jun 26, 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 Co. Sheriff's Dept.	DATE OF INSPECTION 6-19-14
LOCATION OF INSTRUMENT (STREET AND CITY) 500 W. 2ND, Rolla, Mo 65401		TIME OF INSPECTION 0459

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) **6-19-14 0459**

COMPUTER DETECTOR

PROGRAM FILTERS

HEATERS SAMPLE CHAMBER **49** °C QUARTZ STANDARD

FLOW DETECTOR CALIBRATION

PUMP HIGH SPEED PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER **Guth Labs** LOT # **12010** EXP. DATE **1-9-15**

SIMULATOR TEMP (34°C ± 0.2°C) **34** °C SIMULATOR SN **SD 2275** 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 = **.102** TEST 2 = **.102** TEST 3 = **.102**

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) — (0.05-.09) | (0.10-.14) — (0.15-.19) — OVER .19 —

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
PERMIT NUMBER/EXPIRATION DATE 220164 7-6-14	TELEPHONE NUMBER 573-426-3860

RETURN COMPLETED REPORT TO THE: **Breath Alcohol Program, MC Department of Health and Senior Services, Southeast District Office
 2875 James Blvd.
 Poplar Bluff, MO 63901**



GUTH LABORATORIES, INC.

630 NORTH 87th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-6470

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.

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
PHELPS COUNTY SHERIFFS DEPT

BAC DATA MASTER SERIAL NUMBER 051892
06/10/14
24159

DIAGNOSTIC CHECK

COMPUTER:	OKAY
PROGRAM (04-37-2095):	OKAY
WEAVERS SAMPLE CHAMBER:	OK
FLOW DETECTOR:	OKAY
BLIND HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STRIP:	OKAY
CALIBRATION:	OKAY

TECHNICAL TEST
OPERATOR: [Signature] DATE: 06/10/14
ALL COMPONENTS TESTED AND FOUND TO BE WORKING
ON 06/10/14

Operator Signature



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**BAC DataMaster
Evidence Ticket**

STATE OF MISSISSIPPI
SHELBY COUNTY SHERIFF'S DEPT

NO. INSTRUMENT SERIAL NUMBER 958857
28-12-14

ARREST TIME: 04:00
SUBJECT NAME:
ICE #
DOB: 01-09-02 SEX: F
STATE-I.D.# 10-110004
ARRESTING OFFICER:
LAMBERT/0112/J
OFFICER I.D.# 224
TESTING OFFICER:
LAMBERT
OFFICER I.D.# 224
PERMIT NUMBER: 222.64
EXPIRATION DATE: 07-06-14
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

RADIO INTERFERENCE

Operator Signature

RN 204

2208-02

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BAC DataMaster Evidence Ticket

STATE OF MISSOURI
PHELAS COUNTY SHERIFFS DEPT

DPO DATAMASTER SERIAL NUMBER 952850
26/13/14

TESTING OFFICER:
LAMBERT/PAUL/J
OFFICER I.D.# 204
PERMIT NUMBER: 220164
EXPIRATION DATE: 07/06/15
MISCELLANEOUS DATA:

--- SUPERVISOR NOTE ---

BLANK TEST	.000	05:00
INTERNAL STANDARD	VERIFIED	05:00
EXTERNAL STANDARD	.100	05:00
BLANK TEST	.000	05:05
EXTERNAL STANDARD	.100	05:00
BLANK TEST	.000	05:04
EXTERNAL STANDARD	.100	05:00
BLANK TEST	.000	05:07

N = 3
SIM. = .1
AVE. = .100

Operator Signature



State of Missouri
DEPARTMENT OF HEALTH



PERMIT
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 580-0774 (7-88)

WAL

Director of State Public Health Laboratory

Margaret T. Brumley

Director, Department of Health

Lab. 4 (R7-88)