



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

received 7/28/14-cd
 REPORT #5

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.

REVIEWED
 By Carol Day at 11:13 am, Sep 25, 2014

DATAMASTER SN 950090	NAME OF AGENCY Phelps Co. Sheriff's Dept.	DATE OF INSPECTION 7-22-14
LOCATION OF INSTRUMENT (STREET AND CITY) 500 W. 2ND ROLLS, MO 65401		TIME OF INSPECTION 0212

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) 7-22-14 0212
<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

SIMULATOR SOLUTION SUPPLIER **Guth Labs** LOT # **13010** EXP. DATE **1-9-15**

SIMULATOR TEMP (34°C ± 0.2°C) **34** °C SIMULATOR SN **SD2275** 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 * .098	TEST 2 * .098	TEST 3 * .099
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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) —	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).
N/A

INSPECTING OFFICER	
SIGNATURE 	PRINT FULL NAME Paul J. Lambert
TYPE II PERMIT NUMBER/EXPIRATION DATE 240292 6-27-16	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.

590 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 MISSOURI
PHelps COUNTY SHERIFFS DEPT

DRUG LABORATORY SERIAL NUMBER 000003
BT 02/14

ARREST TIME: 01:00
SUBJECT NAME:
JIMMY BUSH
DOB: 02/02/70 SEX: M
STATE C.L. NO: 891302
ARRESTING OFFICER:
LAMBERT/98124
OFFICER I.D. NO: 284
TESTING OFFICER:
LAMBERT/98124
OFFICER I.D. NO: 284
PERMIT NUMBER: 848510
EXPIRATION DATE: 06/27/10
MISCELLANEOUS: 10/01

--- BRUNNEN PHENOL ---

BLANK TEST	1002	02/12
INTERNAL CONTROL	1002	02/12
QC/QC INTERFERENCE		

Operator Signature _____



Place This Side Down - This Edge to Left

**BAC Data Master
Evidence Ticker**

STATE OF MASSACHUSETTS
SUFFOLK COUNTY SHERIFF'S DEPT

300 MOTORCYCLE SERIAL NUMBER 250000
07/12/04

TESTING NUMBER: 100
LABORATORY: 100
OFFICER I.D. #: 204
PERMIT NUMBER: 240000
EMPLOYMENT DATE: 06/27/04
MISCELLANEOUS TEST:

--- SUPERVISOR SIGN ---

BLANK TEST	.000	02:16
INTERNAL STANDARD	VERIFIED	02:17
EXTERNAL STANDARD	.000	02:18
BLANK TEST	.000	02:19
INTERNAL STANDARD	.000	02:17
BLANK TEST	.000	02:18
EXTERNAL STANDARD	.000	02:19
BLANK TEST	.000	02:19

N = 1
S.D. = 0
AVG. = .0000

Operator Signature _____



Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
POLICE COUNTY SHERIFFS ASSN

811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000

DETAILED CHECK

COMPILER:	DATE:
PROGRAM (04-02-0001):	UNIT:
HEATER:	AGE:
FLOW DETECTOR:	DATE:
MWP	DATE:
HIGH SPEED:	DATE:
TESTER:	DATE:
FILTER:	DATE:
GLASS:	DATE:
CRIMINAL:	DATE:

TESTING UNIT
PROGRAM (04-02-0001) FILED (04-02-0001)
PROGRAM (04-02-0001) FILED (04-02-0001)
PROGRAM (04-02-0001) FILED (04-02-0001)

Operator Signature





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



PERMIT
TYPE II
PAUL J LAMBERT

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.

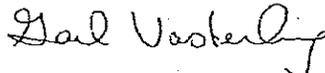
DATE 6/27/2014

NUMBER 240292

EXPIRES 6/27/2016



DIRECTOR OF STATE PUBLIC HEALTH LABORATORY



DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 680-0771 (5-10)

LAS-4 (PS-10)

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

INSTRUMENT OPERATOR CARD

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



Operator LAMBERT, PAUL
Permit No 240292
Date Issued 6/27/2014 Date Expires 6/27/2016