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

# DATAMASTER MAINTENANCE REPORT

REPORT #6

RECEIVED
By Carol Day at 9:44 am, Jul 14, 2014

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 da
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 | NAME OF AGENCY | DATE OF INSPECTION |
|---|---|---|
| 950107 | Stone County Sheriff Dept. | 07/01/2014 |

| LOCATION OF INSTRUMENT (STREET AND CITY) | TIME OF INSPECTION |
|---|---|
| P.O. Box 245 or 110 S. Maple St. Galena, Mo. 65656 | 8:35 am |

**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) 07-01-2014/08:35

☑ COMPUTER ☑ DETECTOR

☑ PROGRAM ☑ FILTERS

☑ HEATERS SAMPLE CHAMBER 49 °C ☑ QUARTZ STANDARD

☑ FLOW DETECTOR ☑ CALIBRATION

☑ PUMP HIGH SPEED ☑ PRINTER

☑ INDICATOR LIGHTS

☑ SIMULATOR SOLUTION SUPPLIER Guth Laboratories Inc. LOT # 13280 EXP. DATE 10/16/2015

☑ SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN SD2282 EXP. DATE 01/10/2015

☑ 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 | TEST 2 | TEST 3 |
|---|---|---|
| .096 | .096 | .097 |

☑ 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 |
|---|---|---|---|---|---|
| 0 | 1 | 0 | 1 | 5 | 0 |

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).

Operates within DOHSS established limits.

**INSPECTING OFFICER**

| SIGNATURE | PRINT FULL NAME |
|---|---|
| Trent Massey | Sgt. Trent Massey #123 |

| TYPE II PERMIT NUMBER/EXPIRATION DATE | TELEPHONE NUMBER |
|---|---|
| 220218 09/04/2014 | (417) 357-6116 |

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.
880 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 13280 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 18, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1217% (w/vol) ethyl alcohol. The expiration date for this lot number is October 16, 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.*

# BAC DataMaster
## Evidence Ticket

STATE OF MISSOURI
STONE COUNTY SHERIFF'S DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950107
07/01/14
08:41

--- 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:;<=>?@ABCDEFG
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmno
pqrstuvwxyz{|}~

Operator Signature Lt. Lt Matley #123

2208-02


# BAC DataMaster
## Evidence Ticket

STATE OF MISSOURI
STONE COUNTY SHERIFF'S DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950107
07/01/14


TESTING OFFICER:
MASSEY/TRENT
OFFICER I.D.: 123
PERMIT NUMBER: 220218
EXPIRATION DATE: 09/04/14
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

| | | |
|---|---|---|
| BLANK TEST | .000 | 08:35 |
| INTERNAL STANDARD | VERIFIED | 08:35 |
| EXTERNAL STANDARD | .096 | 08:36 |
| BLANK TEST | .000 | 08:36 |
| EXTERNAL STANDARD | .096 | 08:37 |
| BLANK TEST | .000 | 08:37 |
| EXTERNAL STANDARD | .097 | 08:38 |
| BLANK TEST | .000 | 08:39 |

N = 3
SIM. = .1
AVG. = .0963

Operator Signature Lt. Lt Matley #123

2208-02

Face This Side Down – This Edge In First

**BAC DataMaster**
**Evidence Ticket**

STATE OF MISSOURI
STONE COUNTY SHERIFF'S DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950107
07/01/14

ARREST TIME: 08:00
SUBJECT NAME:
MONTHLY/MAINT
DOB: 07/01/14 SEX: M
STATE/D.L.: MO/1234
ARRESTING OFFICER:
MASSEY/TRENT
OFFICER I.D.: 123
TESTING OFFICER:
MASSEY/TRENT
OFFICER I.D.: 123
PERMIT NUMBER: 220218
EXPIRATION DATE: 09/04/14
MISCELLANEOUS DATA:
RFI CHECK

--- BREATH ANALYSIS ---

| | | |
|---|---|---|
| BLANK TEST | .000 | 08:44 |
| INTERNAL STANDARD | VERIFIED | 08:44 |
| RADIO INTERFERENCE | | |

Operator Signature Lgt. Int Massey #123

2208-02

Face This Side Down – This Edge In First

**BAC DataMaster**
**Evidence Ticket**

STATE OF MISSOURI
STONE COUNTY SHERIFF'S DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950107
07/01/14

ARREST TIME: 08:00
SUBJECT NAME:
MONTHLY/MAINT
DOB: 07/01/14 SEX: M
STATE/D.L.: MO/1234
ARRESTING OFFICER:
MASSEY/TRENT
OFFICER I.D.: 123
TESTING OFFICER:
MASSEY/TRENT
OFFICER I.D.: 123
PERMIT NUMBER: 220218
EXPIRATION DATE: 09/04/14
MISCELLANEOUS DATA:
SELF TEST

--- BREATH ANALYSIS ---

| | | |
|---|---|---|
| BLANK TEST | .000 | 08:47 |
| INTERNAL STANDARD | VERIFIED | 08:47 |
| SUBJECT SAMPLE | .000 | 08:48 |
| BLANK TEST | .000 | 08:48 |

Operator Signature Lgt. Int Massey #123

2208-02

State of Missouri
DEPARTMENT OF HEALTH

# PERMIT
# TYPE II

TRENT MASSEY

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER; ALCO-SENSOR IV W/PRINTER

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 09/04/2012

Number 220218

Expires 09/04/2014

Director of State Public Health Laboratory

Director, Department of Health

MO 580-0771 (7-88)

Lab. 4 (R7-88)