



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

received 8/21/14-cd 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.

REVIEWED
 By Carol Day at 12:16 pm, Aug 28, 2014

DATAMASTER SN 960016	NAME OF AGENCY El Dorado Springs Police Department	DATE OF INSPECTION 08/13/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 1207 South Main Street El Dorado Springs		TIME OF INSPECTION 10119

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) <u>08/13/14 10:27</u>
<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 <u>49</u> °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 <u>Green</u>	
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER <u>Guth Laboratories Inc</u>	LOT # <u>14110</u> EXP. DATE <u>05/01/2016</u>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34.02</u> °C	SIMULATOR SN <u>SD3146</u> EXP. DATE <u>01/23/2015</u>

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 <u>097</u>	TEST 2 <u>098</u>	TEST 3 <u>098</u>
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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 <u>0</u>	(0-.04) <u>0</u>	(.05-.09) <u>0</u>	(.10-.14) <u>1</u>	(.15-.19) <u>0</u>	OVER .19 <u>0</u>
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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).

This instrument meets Department of Health and Senior Services rules and regulations.

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME Jarrod Schiereck
TYPE II PERMIT NUMBER EXPIRATION DATE 220227 09/05/2014	TELEPHONE NUMBER (417) 876-2313

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.

690 NORTH 87th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14110 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on May 5, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1206% (w/vol) ethyl alcohol. The expiration date for this lot number is May 1, 2016 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 Certified Reference Standard lot number FNI22211-02 whose values are traceable to NIST.

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
EL DORADO SPRINGS POLICE DEPARTMENT
BAC DATAMASTER SERIAL NUMBER 960015
08/13/14

TESTING OFFICER:
SCHIBRECK/JERROLD/J
OFFICER I.D.: 199
PERMIT NUMBER: 220227
EXPIRATION DATE: 09/05/14
MISCELLANEOUS DATA:
AUGUST/2014

--- SUPERVISOR NONE ---

BLANK TEST	.0000	VERIFIED	10:31
INTERNAL STANDARD	.0000		10:31
EXTERNAL STANDARD	.0000		10:32
BLANK TEST	.0000		10:32
EXTERNAL STANDARD	.0000		10:33
BLANK TEST	.0000		10:33
EXTERNAL STANDARD	.0000		10:34
BLANK TEST	.0000		10:34

N = 3
SIM. = .1
RMS. = .0575

Operator Signature



BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
EL DORADO SPRINGS POLICE DEPARTMENT
BAC DATAMASTER SERIAL NUMBER 960015
08/13/14
10:27

--- BIPRODSTID CHECK ---

COMPUTER:	OKAY
PROGRAM (04-07-2009):	OKAY
HEATERS	
SAMPLE CHAMBER:	49c
FLUJ DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTORS:	OKAY
FILTERS:	OKAY
QUARTZ STANDARDS:	OKAY
CALIBRATION:	OKAY

PRINTER TEST
!#\$%&'()*+,-./:0123456789:;<=>?@AB CDEF
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdef ghijklmnop
qrstuvwxyzz{|}~

Operator Signature



Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ELIORODD SPRINGS POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 953015
08/12/14

ARREST TIME: 12:00
SUBJECT NAME:

BOE/JOHN/R
DOB: 07/09/74 SEX: M
STATE/D.L.: MO/122388R

ARRESTING OFFICER:
SCHIERECK/JARROD/B
OFFICER I.D.: 109

TESTING OFFICER:
SCHIERECK/JARROD/B
OFFICER I.D.: 109
PERMIT NUMBER: 220227
EXPIRATION DATE: 08/25/14
MISCELLANEOUS DATA:
R.F.V. TEST

--- BREATH ANALYSIS ---

BLANK TEST : 0000 12:38
INTERNAL STRONGARD VERIFIED 10:38
RADIO INTERFERENCE

Operator Signature



State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



JARROD D SCHIERECK

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 09/05/2012

Number 220227

Expires 09/05/2014

MO 580-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)