



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

RECEIVED REPORT #6
 By Carol Day at 8:19 am, Nov 07, 2014

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 980062	NAME OF AGENCY Riverview PD	DATE OF INSPECTION 11/05/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 9699 Lilac Riverview		TIME OF INSPECTION 9:12 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.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) 11/05/2014 09:12
<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 <u>Guth</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</u> °C SIMULATOR SN <u>SD2769</u> EXP. DATE <u>05/19/2015</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>.100</u>	TEST 2 <u>.099</u>	TEST 3 <u>.099</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	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	OVER .19	0
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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 Nicholes Allred
TYPE II PERMIT NUMBER/EXPIRATION DATE 220438 12/27/2014	TELEPHONE NUMBER (314) 868-9130

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 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-684-6470

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 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
RIVERVIEW POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 960062
11/05/14

TESTING OFFICER:
ALLRED/M
OFFICER I.D.: 247
PERMIT NUMBER: 220438
EXPIRATION DATE: 12/27/14
MISCELLANEOUS DATA:

--- SUPERVISOR CODE ---

BLANK TEST	.000	09:17
INTERNAL STANDARD	VERIFIED	09:17
EXTERNAL STANDARD	.100	09:17
BLANK TEST	.000	09:18
EXTERNAL STANDARD	.000	09:18
BLANK TEST	.000	09:19
EXTERNAL STANDARD	.000	09:19
BLANK TEST	.000	09:20

W = 3
M = .1
V = .0093

Signature

2208-02

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
RIVERVIEW POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 960062
11/05/14
09:12

--- 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:;<=>?@ABCDEFGHI
JKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmnopghijklmno
pqrstuvwxyz{|}~*

Operator Signature

2208-01

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
RIVERVIEW POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 960062
11/05/14

ARREST TIME: 08:55
SUBJECT NAME:
DOR/JON/LES
DOB: 05/27/77 SEX: M
STATE/D.L.# MO/654545434
ARRESTING OFFICER:
ALLRED/NICK
OFFICER I.D.: 247
TESTING OFFICER:
ALLRED/NICK
OFFICER I.D.: 247
PERMIT NUMBER: 220438
EXPIRATION DATE: 12/27/14
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	09:25
INTERNAL STANDARD	VERIFIED	09:25
SUBJECT SAMPLE	.000	09:26
RADIO INTERFERENCE		

Operator Signature



State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
TYPE II



NICHOLE S C ALLRED

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 12/27/2012

Number 220438

Expires 12/27/2014

MO 680-0771 (7-88)

Director of State Public Health Laboratory

ACTING DIRECTOR

Director, Department of Health

Lab. 4 (07-06)