



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

**RECEIVED**  
By Carol Day at 9:03 am, Jan 16, 2014

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 3 months). 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: 980131 NAME OF AGENCY: MARTHA'SVILLE Police Dept. DATE OF INSPECTION: 01-10-14  
 LOCATION OF INSTRUMENT (STREET AND CITY): 402 E. MAIN MARTHA'SVILLE, MO. 63357 TIME OF INSPECTION: 0900 hrs.

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) 01-10-14 @ 0941

COMPUTER  DETECTOR

PROGRAM 04-07-09  FILTERS

HEATERS SAMPLE CHAMBER 49 °C  QUARTZ STANDARD

FLOW DETECTOR  CALIBRATION

PUMP HIGH SPEED  PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER GUTH LABS LOT # 13280 EXP. DATE 10-16-15

SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN SD 2295 EXP. DATE 2014

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 = .096 TEST 2 = .097 TEST 3 = .098

PERFORM R.F.I. TEST (PRINTOUT ATTACHED) (RADIO INTERFERENCE)

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) 0 OVER .19 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).

Instrument Tested and certified within DHSS STANDARDS.

INSPECTING OFFICER

SIGNATURE: E. Ray House PRINT FULL NAME: EMMANUEL R HOUSE

TYPE II PERMIT NUMBER/EXPIRATION DATE: 220233 / 09-07-14 TELEPHONE NUMBER: 636.433.2328

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 87th 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.

Bottle # 1406

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.

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



EMMANUEL R HOUSE

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 09/07/2012

Number 220233

Expires 09/07/2014

Director of State Public Health Laboratory

Director, Department of Health

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
MARTHASVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 980131  
01/10/14  
09:41

--- 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:;<=>?@ABCDEFGHIJ  
KLMNOPQRSTUVWXYZ[\]^\_`abcdefg hijklmno  
pqrstuvwxyz{|}~

Operator Signature

*P.O. E. Ray House 302*

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
MARTHASVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 980131  
01/10/14

ARREST TIME: 09:00  
SUBJECT NAME:  
RADIO/FREQ/TEST  
DOB: 11/11/77 SEX: M  
STATE/D.L.: MO/123456789  
ARRESTING OFFICER:  
HOUSE/RAY  
OFFICER I.D.: 302  
TESTING OFFICER:  
HOUSE/RAY  
OFFICER I.D.: 302  
PERMIT NUMBER: 220233  
EXPIRATION DATE: 09/07/14  
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 09:52  
INTERNAL STANDARD VERIFIED 09:53  
RADIO INTERFERENCE

Operator Signature

*P.O. E. Ray House # 302*

Face This Side Down - This Edge In First

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

STATE OF MISSOURI  
MARTHASVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 980131  
01/10/14

TESTING OFFICER:  
HOUSE/RAY  
OFFICER I.D.: 302  
PERMIT NUMBER: 220233  
EXPIRATION DATE: 09/07/14  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	09:44
INTERNAL STANDARD	VERIFIED	09:44
EXTERNAL STANDARD	.096	09:45
BLANK TEST	.000	09:45
EXTERNAL STANDARD	.097	09:46
BLANK TEST	.000	09:46
EXTERNAL STANDARD	.098	09:47
BLANK TEST	.000	09:47

N = 3  
SIM. = .1  
AVG. = .097

Operator Signature

P.O. E. Ray House # 302