



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

RECEIVED REPORT #6
 By Carol Day at 9:56 am, Jun 22, 2015

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 30 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 #201217	NAME OF AGENCY Crystal City Police Department	DATE OF INSPECTION 06/19/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 130 Mississippi Avenue, Crystal City		TIME OF INSPECTION 8:15 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) 06/19/15 08:43
<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 Laboratories, Inc. LOT # 15050 EXP. DATE 03/09/2017

SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN DR3772 EXP. DATE 05/18/2016

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 <input checked="" type="checkbox"/> .101	TEST 2 <input checked="" type="checkbox"/> .100	TEST 3 <input checked="" type="checkbox"/> .100
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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 <i>Sgt. Jeffery S. Wynn #204</i>	PRINT FULL NAME Sgt. Jeffery S. Wynn, DSN-204
TYPE II PERMIT NUMBER/EXPIRATION DATE 240141 04/06/2016	TELEPHONE NUMBER (636) 937-4601

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.**

890 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-684-5470

CERTIFICATE OF ANALYSIS**Certified Alcohol Reference Solution for Simulator**

Random Samples of Lot Number 15050 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 11, 2015, 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 March 9, 2017 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 FN08051301 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
CRYSTAL CITY POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 20121
06/19/15
06142

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM (04-67-6000): OKAY

HEATERS

SAMPLE (HANDER): OK

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!@#%&'()*+,-./:;<=>?@A B C D E F G H I J K L M N O P Q R S T U V W X Y Z [\] ^ _ ` a b c d e f g h i j k l m n o p q r s t u v w x y z { | } ~

Operator Signature

[Signature] #204 Type II

2208-02

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
CRYSTAL CITY POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 20121
06/19/15

TESTING OFFICER:

WYNN/JEFFERY/S
OFFICER I.D.: 204
PERMIT NUMBER: 240141
EXPIRATION DATE: 04/02/16
MISCELLANEOUS DATA:

--- SUPERVISOR NOTE ---

BLANK TEST	.000	08:46
INTERNAL STANDARD	VERIFIED	08:46
EXTERNAL STANDARD	.101	08:47
BLANK TEST	.000	08:48
EXTERNAL STANDARD	.100	08:48
BLANK TEST	.000	08:49
EXTERNAL STANDARD	.100	08:50
BLANK TEST	.000	08:50

N = 3
SIN. = .1
RVG. = .1000

Operator Signature

[Signature] #204 Type II

221

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
CRYSTAL CITY POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201211
06/19/15

ARREST TIME: 08:15
SUBJECT NAME:
TEST/RFI
DOB: 01/02/24 SEX: F
STATE D.L. #: MO/A123456789
ARRESTING OFFICER:
WYNN/JEFFERY/S
OFFICER I.D. #: 204
TESTING OFFICER:
WYNN/JEFFERY/S
OFFICER I.D. #: 204
PERMIT NUMBER: 240141
EXPIRATION DATE: 04/03/16
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

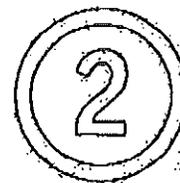
BLANK TEST	.000	08:54
INTERNAL STANDARD	VERIFIED	08:55
RADIO INTERFERENCE		

Operator Signature

[Handwritten Signature] #204 Type II



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



PERMIT
TYPE II

JEFFERY S WYNN

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

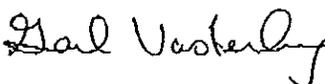
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 4/3/2014

NUMBER 240141

EXPIRES 4/3/2016

MO 590-0771 (6-10)


DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (RS-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 WYNN, JEFFERY
Permit No 240141
Date Issued 4/3/2014 Date Expires 4/3/2016