



**RECEIVED**

By Carol Day at 2:15 pm, Jan 06, 2015

Complete this report at the time of the regular monthly maintenance check (not to exceed 30 days).  
Complete this report whenever the instrument is serviced, 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 201231	NAME OF AGENCY Thayer Police Department	DATE OF INSPECTION 01/03/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 102 Front St. Thayer, Mo Thayer Police Department		TIME OF INSPECTION 8:10 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) 01/03/2015 08:10
<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 Lab LOT # 14220 EXP. DATE 09/24/2016

SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN SD2301 EXP. DATE 03/12/2015

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 → .101	TEST 2 → .103	TEST 3 → .102
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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-.04) _____	(.05-.09) _____	(.10-.14) _____	(.15-.19) _____	OVER .19 _____
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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).

<b>INSPECTING OFFICER</b>	
SIGNATURE Sgt. James A. Martin 4094	PRINT FULL NAME Sgt. James A. Martin 4094
TYPE II PERM NUMBER/EXPIRATION DATE 230328 12/23/2015	TELEPHONE NUMBER (417) 264-3819

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

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**CERTIFICATE OF ANALYSIS**

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14220 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on September 25, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1209% (w/vol) ethyl alcohol. The expiration date for this lot number is September 24, 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.

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***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  
BAC DATAMASTER SERIAL NUMBER 201231  
01/03/15

ARREST TIME: 07:45  
SUBJECT NAME:  
MASTER/DATA  
DOB: 02/27/00      SEX: M  
STATE/D.L.: MO/012345  
ARRESTING OFFICER:  
MARTIN/J/R  
OFFICER I.D.: 4094  
TESTING OFFICER:  
MARTIN/J/R  
OFFICER I.D.: 4094  
PERMIT NUMBER: 200328  
EXPIRATION DATE: 12/29/15  
MISCELLANEOUS DATA:  
R.F.I TEST  
R.F.I TEST

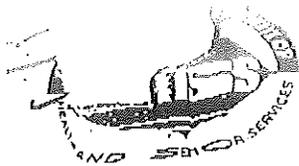
--- BREATH ANALYSIS ---

BLANK TEST	.000	08:19
INTERNAL STANDARD	VERIFIED	08:19
RADIO INTERFERENCE		

Operator Signature

*E. J. A. Martin*





Missouri Department of Health and Senior Services Breath Alcohol Program

SIMULATOR CALIBRATION REPORT

This is to certify that the simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance to the standards set by the Rules of Missouri Department of Health and Senior Services, 19 CSR 25-30.

SIMULATOR INFORMATION

Agency: Thayer Police Department  
 Serial Number: SD 2301  
 Manufacturer: Guth  
 Model Number: 10-4D

CALIBRATION RESULTS

<u>Reference Temperature</u>	<u>Simulator Temperature</u>
34.00	34.0

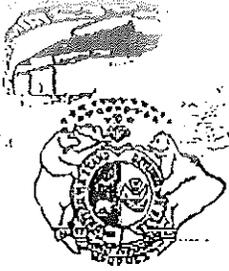
This calibration was performed with  
 NIST-Traceable Thermometer SN: 304447  
 This calibration was performed by: Brian M. Lutner  
 This calibration was performed: 03/12/2014

COPY OF CALIBRATION STICKER

This simulator has been calibrated according to DHS specifications



SIMULATOR SERIAL NO.:	<u>SD2301</u>
EXPIRATION DATE:	<u>03/12/2015</u>
DATE OF CALIBRATION:	<u>03/12/2014</u>
NIST REF. THERM. SERIAL NO.:	<u>304447</u>
AVERAGE SIM. TEMP.:	<u>34.00 C</u>
ANALYST INITIALS:	<u>BML</u>



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

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**PERMIT**  
**TYPE II**

**JAMES A MARTIN**

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 12/23/2013

NUMBER 230328

EXPIRES 12/23/2015

MO 550-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (RS-10)