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

DATAMASTER MAINTENANCE REPORT

REPORT #6

RECEIVED
By Carol Day at 10:30 am, Aug 21, 2015

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed [illegible]
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	NAME OF AGENCY	DATE OF INSPECTION
940093	AVA POLICE DEPARTME	08/12/2015
LOCATION OF INSTRUMENT (STREET AND CITY)		TIME OF INSPECTION
504 NW 1TH AVENUE AVA, MO. 65608 (AVA POLICE DEPT.)		8:54 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.

☑ DIAGNOSTIC CHECK (PRINTOUT ATTACHED) DATE AND TIME (from printout) 08:45 AM 08/12/2015

☑ COMPUTER ☑ DETECTOR

☑ PROGRAM ☑ FILTERS

☑ HEATERS SAMPLE CHAMBER 48 °C ☑ QUARTZ STANDARD

☑ FLOW DETECTOR ☑ CALIBRATION

☑ PUMP HIGH SPEED ☑ PRINTER

☑ INDICATOR LIGHTS

☑ SIMULATOR SOLUTION SUPPLIER GUTH LABORATORIES INC LOT # 14110 EXP. DATE 05/01/2016

☑ SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN SD1617 EXP. DATE 04/13/2016

☑ 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	TEST 2	TEST 3
0.100	0.098	0.100

☑ 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
0	6	1	1	0	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).

THIS INSTRUMENT IS OPPERATING WITHIN DOH STANDARDS

INSPECTING OFFICER

SIGNATURE	PRINT FULL NAME
Lt. Trent Murray	LT. TRENT MURRAY
TYPE II PERMIT NUMBER/EXPIRATION DATE	TELEPHONE NUMBER
230236 10/17/2015	(417) 683-2931

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 67th 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 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.

Face This Side Down – This Edge Is First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
AVA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 940093
08/12/15
08:54

--- 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:;<=>?@ABCDEFG
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmno
pqrstuvwxyz{|}~

Operator Signature D. Trent Murray

2208-02

Face This Side Down – This Edge Is First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
AVA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 940093
08/12/15

ARREST TIME: 08:38
SUBJECT NAME:
MURRAY
DOB: 04/22/78 SEX: M
STATE/D.L.: MO/1234567890
ARRESTING OFFICER:
MURRAY
OFFICER I.D.: 406
TESTING OFFICER:
MURRAY
OFFICER I.D.: 406
PERMIT NUMBER: 238236
EXPIRATION DATE: 10/17/15
MISCELLANEOUS DATA:
RFI TEST
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	08:52
INTERNAL STANDARD	VERIFIED	08:58
RADIO INTERFERENCE		

Operator Signature D. Trent Murray

2208-02

Face This Side Down – This Edge Is First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
AVA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 940890
08/12/15

TESTING OFFICER:
MURRAY
OFFICER I.D.: 406
PERMIT NUMBER: 230236
EXPIRATION DATE: 10/17/15
MISCELLANEOUS DATA:
MONTHLY MAINT RPT

---- SUPERVISOR MODE ---

BLANK TEST	.000	09:00
INTERNAL STANDARD	VERIFIED	09:01
EXTERNAL STANDARD	.100	09:01
BLANK TEST	.000	09:02
EXTERNAL STANDARD	.098	09:02
BLANK TEST	.000	09:03
EXTERNAL STANDARD	.100	09:03
BLANK TEST	.000	09:04

N = 2
STM. = .1
AVG. = .0993

Operator Signature H. Trent Murray

2208-02

2

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

PERMIT
TYPE II

NORMAN T MURRAY

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repair 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 section 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 10/17/2013

NUMBER 230236

EXPIRES 10/17/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-4 (R6-10)

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 MURRAY, NORMAN
Permit No 230236
Date Issued 10/17/2013 Date Expires 10/17/2015