



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

**RECEIVED**  
 By Carol Day at 12:27 pm, Jun 24, 2016

REPORT #6

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 202091	NAME OF AGENCY Directorate of Emergency Services	DATE OF INSPECTION 06/24/2016
LOCATION OF INSTRUMENT (STREET AND CITY) Bldg 1000, Fort Leonard Wood, Mo 65473		TIME OF INSPECTION 10:16 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) <u>06/24/2016 10:16 am</u>
<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 <u>50</u> °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 LOT # 14220 EXP. DATE 09/24/2016

SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN DR5376 EXP. DATE 09/10/2016

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  .097	TEST 2  .097	TEST 3  .098
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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).

TESTED AND CERTIFIED AS WITHIN GUIDELINES ESTABLISHED BY DHSS

INSPECTING OFFICER	
SIGNATURE 	PRINT FULL NAME ANTHONY NARUG
TYPE II PERMIT NUMBER/EXPIRATION DATE 250063 03/04/2017	TELEPHONE NUMBER (573) 596-6141

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

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

FORT LEONARD WOOD  
DIRECTORATE OF EMERGENCY SERVICES

BAC DATAMASTER SERIAL NUMBER 202091  
06/24/16

ARREST TIME: 10:00  
SUBJECT NAME:  
RFI/TEST  
DOB: 01/23/45      SEX: F  
STATE/D.L.L.: MD/P1357908642  
ARRESTING OFFICER:  
RFI/TEST  
OFFICER I.D.:  
TESTING OFFICER:  
NARUG/ANTHONY  
OFFICER I.D.: N3343  
PERMIT NUMBER: 250063  
EXPIRATION DATE: 03/04/17  
MISCELLANEOUS DATA:  
RDI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	10:22
INTERNAL STANDARD	VERIFIED	10:22
SQLD INTERFERENCE		

Operator Signature



2208-02



Face This Side Down - This Edge In First

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

FORT LEONARD WOOD  
DIRECTORATE OF EMERGENCY SERVICES

BAC DATAMASTER SERIAL NUMBER 263091  
06/24/16

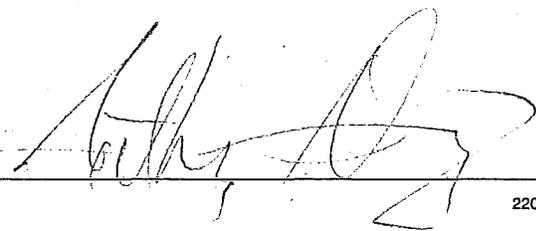
TESTING OFFICER:  
NARUS/ANTHONY  
OFFICER I.D.: H3343  
PERMIT NUMBER: 250063  
EXPIRATION DATE: 03/04/17  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	10:28
INTERNAL STANDARD	VERIFIED	10:29
EXTERNAL STANDARD	.097	10:29
BLANK TEST	.000	10:29
EXTERNAL STANDARD	.097	10:30
BLANK TEST	.000	10:30
EXTERNAL STANDARD	.098	10:31
BLANK TEST	.000	10:31

N = 3  
SIN. = .1  
AVG. = .0973

Operator Signature





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

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**PERMIT  
TYPE II**

**ANTHONY NARUG**

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 3/4/2015

NUMBER 250063

EXPIRES 3/4/2017

  
\_\_\_\_\_  
DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

  
\_\_\_\_\_  
acting director  
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 520-0771 (5-12)

LAB-4 (05-10)



**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 NARUG, ANTHONY  
Permit No 250063  
Date Issued 3/4/2015 Date Expires 3/4/2017

**CERTIFIED ALCOHOL REFERENCE  
SOLUTION FOR SIMULATOR**

<u>14220</u>	<u>9/24/14</u>	<u>9/24/16</u>
<b>LOT NO.</b>	<b>MFG. DATE</b>	<b>EXP. DATE</b>

<u>275 Gal.</u>	<u>500 ML</u>	
<b>LOT VOL.</b>	<b>BOT. VOL.</b>	<b>BOT. NO.</b>

When this reference solution is used with a breath simulator certified by Guth Laboratories, a properly operating instrument will read 0.10

For additional information contact:

**Guth Laboratories, Inc.**

**590 North 67<sup>th</sup> Street, Harrisburg, PA 17111**

**Toll Free 800-233-2338**

Rev. 4/02





## 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 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.

***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.*