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

DATAMASTER MAINTENANCE REPORT

REPORT #6

RECEIVED
By Carol Day at 4:07 pm, Feb 03, 2016

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 pla
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

DATAMASTER SN	NAME OF AGENCY	DATE OF INSPECTION
950124	Kirksville Police Department	01/27/2016

LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION
119 E McPherson, Kirksville, MO, 63501	6:09 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) 01/27/2016 06:09 hours

☑ COMPUTER	☑ DETECTOR
☑ PROGRAM	☑ FILTERS
☑ HEATERS SAMPLE CHAMBER 49 °C	☑ QUARTZ STANDARD
☑ FLOW DETECTOR	☑ CALIBRATION
☑ PUMP HIGH SPEED	☑ PRINTER

☑ INDICATOR LIGHTS

☑ SIMULATOR SOLUTION SUPPLIER Guth Labs LOT # 15120 EXP. DATE 04/29/2017

☑ SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD2271 EXP. DATE 12/02/2016

☑ 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 ☛ .101	TEST 2 ☛ .102	TEST 3 ☛ .102

☑ 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	0	0	0	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).

INSPECTING OFFICER

SIGNATURE	PRINT FULL NAME
▸ [signature] KPD383	Juan B Chairez
TYPE II PERMIT NUMBER/EXPIRATION DATE	**TELEPHONE NUMBER**
250152 07/22/2017	(660) 785-6945

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

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
services provided on a nondiscriminatory basis

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 **15120** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **May 4, 2015**, 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 **April 29, 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.

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

2

PERMIT
TYPE II

JUAN B CHAIREZ

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, INTOX DMT

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 7/22/2015

NUMBER 250152

EXPIRES 7/22/2017

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (5-10)

LAB 4 (R5-15)

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 CHAIREZ, JUAN
Permit No 250152
Date Issued 7/22/2015 Date Expires 7/22/2017

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
KIRKSVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950104
01/27/16

ARREST TIME: 04:00
SUBJECT NAME:
N/A
DOB: 01/01/01 SEX: M
STATE/D.L.: MO/
ARRESTING OFFICER:
NA
OFFICER I.D.:
TESTING OFFICER:
CHAIREZ/JUAN/S
OFFICER I.D.: 383
PERMIT NUMBER: 250152
EXPIRATION DATE: 07/22/17
MISCELLANEOUS DATA:
RFI

BREATH ANALYSIS

BLANK TEST	.000	06:20
INTERNAL STANDARD	VERIFIED	06:20
RADIO INTERFERENCE		

erator Signature J. C. KPD383

2208-02

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
KIRKSVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950104
01/27/16
06:00

DIAGNOSTIC CHECK

COMPUTER	OKAY
PROGRAM (04 07 2000)	OKAY
HEATERS	
SAMPLE CHAMBER:	49
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST
[illegible]

Operator Signature J. C. KPD383

2208-02

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
KIRKSVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 959104
01/27/16

TESTING OFFICER:
CHAIREZ/JUAN/D
OFFICER I.D.: 993
PERMIT NUMBER: 259152
EXPIRATION DATE: 07/22/17
MISCELLANEOUS DATA:

- SUPERVISOR MODE -

BLANK TEST	.000	06:14
INTERNAL STANDARD	VERIFIED	06:14
EXTERNAL STANDARD	.101	06:14
BLANK TEST	.000	06:15
EXTERNAL STANDARD	.101	06:15
BLANK TEST	.000	06:16
EXTERNAL STANDARD	.102	06:16
BLANK TEST	.000	06:17

N : 3
SIM. : .1
AVG. .1016

Operator Signature KPD383

2208-02