MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY

DATAMASTER MAINTENANCE REPORT

BREATH ALCOHOL PROGRAM
JUN -8 2009
DHSS STATE HEALTH LAB

Complete this report in duplicate at the time of the regular monthly preventive maintenance check and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN	DATE OF INSPECTION
201284	6/3/09
LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION
STJOHN PD 8944 ST CHARLES ROCK RD STJOHN MO 63114	1332

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

☑ DIAGNOSTIC CHECK (PRINTOUT ATTACHED)

☑ COMPUTER	OK	☑ DETECTOR	OK
☑ PROGRAM	OK	☑ FILTERS	OK
☑ HEATERS SAMPLE CHAMBER 48 °C		☑ QUARTZ STANDARD	OK
☑ FLOW DETECTOR	OK	☑ CALIBRATION	OK
☑ PUMP HIGH SPEED	OK	☑ PRINTER	OK

☑ INDICATOR LIGHTS OK

☑ TIME AND DATE 1332 6/3/09

☑ SIMULATOR TEMPERATURE (34 °C ± 0.2°C) 34.0 °C

☑ CALIBRATION CHECK -

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. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

☑ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
~~☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE~~
(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1	TEST 2	TEST 3
.095	.097	.097

☑ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

☑ NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: **(DO NOT INCLUDE SIMULATOR TESTS)**

REFUSALS	(0-.04)	(.05-.09)	(.10-.14)	(.15-.19)	(Over .19)
5	Ø	4	5	2	1

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)

Instrument operating within DOH specifications

Guth Laboratories Inc Lot #08400 Bottle #68
Ethanol Vapor Concentration .10 Expires 12/8/09

INSPECTING OFFICER

SIGNATURE	PRINT NAME
▶ V Manuele	V Manuele
TYPE II PERMIT NUMBER/EXPIRATION DATE	TELEPHONE NUMBER
720256 12/27/09	(314) 427-8700

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 **08400** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1204** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **December 8, 2009** 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 **0.10** percent BAC.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

State of Missouri
DEPARTMENT OF HEALTH

PERMIT
TYPE II

VALERIE MANUELE

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 12/27/07

Number 720256

Expires 12/27/2009

Director of State Public Health Laboratory

Director, Department of Health

MO 580-0771 (7-88)

Lab. 4 (R7-88)

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ST. JOHN POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201264
06/03/09

TESTING OFFICER:
MANUELE/V
OFFICER I.D.: 0142
PERMIT NUMBER: 720250
EXPIRATION DATE: 12/27/09
MISCELLANEOUS DATA:
MAINT CHECK

-- SUPERVISOR MODE --

BLANK TEST	.000	13:34
INTERNAL STANDARD	VERIFIED	13:34
EXTERNAL STANDARD	.095	13:35
BLANK TEST	.000	13:35
EXTERNAL STANDARD	.097	13:36
BLANK TEST	.000	13:36
EXTERNAL STANDARD	.097	13:37
BLANK TEST	.000	13:37

N = 3
STD. = .1
AVG. = .0969

Operator Signature Manuele 142

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ST. JOHN POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201264
06/03/09
13:32

-- DIAGNOSTIC CHECK --

COMPUTER:	OKAY
PROGRAM:	OKAY
HEATERS	
SAMPLE CHAMBER:	40C
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST
[illegible]

Operator Signature Manuele 142

2208-02

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ST. JOHN POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201784
06/03/09

ARREST TIME: 13:00
SUBJECT NAME:
DOE/JOHN
DOB: 01/01/65 SEX: M
STATE/D.L.: MO/12346789
ARRESTING OFFICER:
MANUELE/V
OFFICER I.D.: 0142
TESTING OFFICER:
MANUELE/V
OFFICER I.D.: 0142
PERMIT NUMBER: 720250
EXPIRATION DATE: 12/27/09
MISCELLANEOUS DATA:

-- GREATER ANALYSIS --

RADIO INTERFERENCE

Operator Signature Manuele 142

2208-02