MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY

DATAMASTER MAINTENANCE REPORT

BREATH ALCOHOL PROGRAM

JUL 2 2009

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
204099	05·28·09
LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION
511 WEST CLAY, ROCK PORT	1513

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.

- [x] DIAGNOSTIC CHECK (PRINTOUT ATTACHED)
  - [x] COMPUTER
  - [x] DETECTOR
  - [x] PROGRAM
  - [x] FILTERS
  - [x] HEATERS SAMPLE CHAMBER 49 °C
  - [x] QUARTZ STANDARD
  - [x] FLOW DETECTOR
  - [x] CALIBRATION
  - [x] PUMP HIGH SPEED
  - [x] PRINTER
- [x] INDICATOR LIGHTS
- [x] TIME AND DATE
- [x] SIMULATOR TEMPERATURE (34 °C ± 0.2°C) 34.00° C
- [x] 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)

  - [x] 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
.097	.097	.098

- [x] PERFORM R.F.I. TEST (PRINTOUT ATTACHED)
- [x] 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)
0	8	0	5	4	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)

"OPERATING WITHIN MODOHSS SPECIFICATIONS"

GUTH LABORATORIES INC. 08340, 10-15-09

INSPECTING OFFICER

SIGNATURE	PRINT NAME
Joshua L White	JOSHUA L. WHITE
TYPE II PERMIT NUMBER/EXPIRATION DATE	TELEPHONE NUMBER
720119 / 05·29·09	(816) 387-2345

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 **08340** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography and found to contain **0.1211** percent (w/vol) ethyl alcohol. The expiration date for this lot number is **October 15, 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 alcoh and water used in this solution were free of test interfering substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204099
05/28/09
15:13

---- DIAGNOSTIC CHECK ----

COMPUTER:	OKAY
PROGRAM:	OKAY
HEATERS	
SAMPLE CHAMBER:	49c
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST

[illegible]

Operator Signature [signature]

Printed on recycled paper with agri-based inks

CMSU

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204099
05/28/09

TESTING OFFICER:
WHITE/JOSHUA/L
OFFICER I.D.: 1202
PERMIT NUMBER: 720119
EXPIRATION DATE: 05/29/09
MISCELLANEOUS DATA:
MAINTENANCE

---- SUPERVISOR MODE ----

BLANK TEST	.000	15:19
INTERNAL STANDARD	VERIFIED	15:19
EXTERNAL STANDARD	.097	15:20
BLANK TEST	.000	15:20
EXTERNAL STANDARD	.097	15:21
BLANK TEST	.000	15:21
EXTERNAL STANDARD	.098	15:22
BLANK TEST	.000	15:22

N = 3
SIM. = .1
AVG. = .0973

Operator Signature [signature]

Printed on recycled paper with agri-based inks

CMSU 2208-02

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204099
05-28-09

ARREST TIME: 01:25
SUBJECT NAME:
X-X-X
DOB: 01-23-45 SEX: M
STATE-D.L.: MO XXXXXXXXX
ARRESTING OFFICER:
SAME
OFFICER I.D.: SAME
TESTING OFFICER:
WHITE-JOSHUA-L
OFFICER I.D.: 1202
PERMIT NUMBER: 724119
EXPIRATION DATE: 05-29-09
MISCELLANEOUS DATA:
MAINTENANCE

--- breath analysis ---

ALPHA TEST	.000	15:25
INTERNAL STANDARD	VERIFIED	15:25
RADIO INTERFERENCE		

Operator Signature _____

Printed on recycled paper with agri-based inks

CMSU 2208-02

State of Missouri
DEPARTMENT OF HEALTH

PERMIT
TYPE II

JOSHUA L. WHITE

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 5/29/07

Number 720119

Expires 5/29/09

Director of State Public Health Laboratory

Director, Department of Health

MO 580-0771 (7-88)

Lab. 4 (R7-88)