MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY

DATAMASTER MAINTENANCE REPORT

RECEIVED DHSS Breath Alcohol Program
By Carol Day at 8:43 am, Sep 14, 2009

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

DATAMASTER SN: 204 189

DATE OF INSPECTION: 9-4-09

LOCATION OF INSTRUMENT (STREET AND CITY): HICKORY CO. JAIL HERMITAGE

TIME OF INSPECTION: 1945

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Wri 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 34 °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)
- [x] CALIBRATION CHECK -

  Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (US 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
.095	.096	.096

- [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	0	0	1	1	0

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactori and within established limits (use other side if necessary)

GUTH LAB .10% SOL. LOT 08340 EXP. 101509

INSPECTING OFFICER

SIGNATURE: RJ Fillipi

PRINT NAME: R. J. FILLIPI

TYPE II PERMIT NUMBER/EXPIRATION DATE: 820138 4 28 10

TELEPHONE NUMBER: 417 895 6868

MO 580-1468 (9-94)

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

Lto.

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

Ted L. Pauley

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 204189
09/04/09

TESTING OFFICER:
FILLIPI/RJ
OFFICER I.D.: 352
PERMIT NUMBER: 820138
EXPIRATION DATE: 04/28/10
MISCELLANEOUS DATA:
.10

--- SUPERVISOR MODE ---

BLANK TEST	.000	20:02
INTERNAL STANDARD	VERIFIED	20:02
EXTERNAL STANDARD	.095	20:03
BLANK TEST	.000	20:03
EXTERNAL STANDARD	.096	20:04
BLANK TEST	.000	20:05
EXTERNAL STANDARD	.096	20:05
BLANK TEST	.000	20:06

N = 3
SIM. = .1
AVG. = .0956

Operator Signature

2208-02

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204189
09/04/09
19:51

--- 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 R.J. Fellows

2208-02

– Face This Side Down – This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 204189
09/04/09

ARREST TIME: 19:00
SUBJECT NAME:
DEAN/LK
DOB: 01/01/66 SEX: M
STATE/D.L.: MO/123456
ARRESTING OFFICER:
FILLIPI/RJ
OFFICER I.D.: 352
TESTING OFFICER:
SAME
OFFICER I.D.: 352
PERMIT NUMBER: 820138
EXPIRATION DATE: 04/28/10
MISCELLANEOUS DATA:
RFI

--- BREATH ANALYSIS ---

BLANK TEST	.000	19:54
INTERNAL STANDARD	VERIFIED	19:54
RADIO INTERFERENCE		

Operator Signature R.J. Fillipi

2208-02

State of Missouri
DEPARTMENT OF HEALTH

PERMIT
TYPE II

RUSSELL FILLIPI

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 04/28/08

Number 820138

Expires 04/28/2010

Director of State Public Health Laboratory

Director, Department of Health

MO 580-0771 (7-88)

Lab. 4 (R7-88)