RECEIVED DHSS Breath Alcohol Program
By Carol Day at 8:17 am, Jun 05, 2009

MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY

DATAMASTER MAINTENANCE REPORT

GHQ Academy

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
940239	6/2/2009
LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION
1510 E. Elm St., Jefferson City	14:23

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 13:30 6/2/2009
- [x] SIMULATOR TEMPERATURE (34 °C ± 0.2°C) +34.19°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)

- [ ] 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
- [x] 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
.098	.098	.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	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)

Upgraded firmware from 12-15-1999 to 04-07-2009. Reset time of instrument (DST).

Guth Laboratories, lot #09010, expiring 1/6/2010

INSPECTING OFFICER

SIGNATURE	PRINT NAME
Dewayne D. Carver	Dewayne D. Carver
TYPE II PERMIT NUMBER/EXPIRATION DATE	TELEPHONE NUMBER
720219 10/29/2009	(573) 751-4722

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 alcohol 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 940239
06/04/09
14:23

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM (04-27-2009):	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

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD OH 44901 PHONE 1-800-800-8143 (NPAS)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 940239
06/04/09

TESTING OFFICER:
CARVER/DEWAYNE/D
OFFICER I.D.: C41
PERMIT NUMBER: 720219
EXPIRATION DATE: 10/29/09
MISCELLANEOUS DATA:
.10 VAPOR CALIBRATION CHECK
GUTH LABS LOT 08340 EXP 10/15/2009

--- SUPERVISOR MODE ---

BLANK TEST	.000	14:25
INTERNAL STANDARD	VERIFIED	14:25
EXTERNAL STANDARD	.098	14:26
BLANK TEST	.000	14:26
EXTERNAL STANDARD	.098	14:27
BLANK TEST	.000	14:28
EXTERNAL STANDARD	.098	14:28
BLANK TEST	.000	14:29

N = 3
SIM. = .1
AVG. = .098

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
BAC DATAMASTER SERIAL NUMBER 940239
06/04/09

ARREST TIME: 00:00
SUBJECT NAME:
X
DOB: 01/01/01 SEX: M
STATE/D.L.: XX/X
ARRESTING OFFICER:
X
OFFICER I.D.: X
TESTING OFFICER:
CARVER/DEWAYNE/D
OFFICER I.D.: C41
PERMIT NUMBER: 720219
EXPIRATION DATE: 10/29/09
MISCELLANEOUS DATA:
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	14:35
INTERNAL STANDARD	VERIFIED	14:35
SUBJECT SAMPLE	.000	14:35

RADIO INTERFERENCE

State of Missouri
DEPARTMENT OF HEALTH

PERMIT
TYPE II

DEWAYNE D. CARVER

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 10/29/07

Number 720219

Expires 10/29/2009

Director of State Public Health Laboratory

Director, Department of Health

MO 580-0771 (7-88)

Lab. 4 (R7-68)