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

DATAMASTER MAINTENANCE REPORT

RECEIVED
By Carol Day at 10:21 am, Sep 03, 2013

REPORT #6

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

DATAMASTER SN	NAME OF AGENCY	DATE OF INSPECTION
931124	Bowling Green Police Department	08/31/2013

LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION
15 West Church Street, Bowling Green	8:29 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) 8-31-13, 08:29

☑ COMPUTER ☑ DETECTOR

☑ PROGRAM ☑ FILTERS

☑ HEATERS SAMPLE CHAMBER 48 °C ☑ QUARTZ STANDARD

☑ FLOW DETECTOR ☑ CALIBRATION

☑ PUMP HIGH SPEED ☑ PRINTER

☑ INDICATOR LIGHTS

☑ SIMULATOR SOLUTION SUPPLIER Guth Labs, Inc. LOT # 13010 EXP. DATE 01/09/2015

☑ SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD 2507 EXP. DATE 01/15/2014

☑ 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 ☛ .099	TEST 2 ☛ .098	TEST 3 ☛ .099

☑ 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	2	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).

Simulator checked on January 15, 2013 by Bob Welsh--MO Safety Center
10 self-administered tests for re-cert purposes

INSPECTING OFFICER

SIGNATURE	PRINT FULL NAME
▸ R.E. Owen #530	R.E. Owen

TYPE II PERMIT NUMBER/EXPIRATION DATE	TELEPHONE NUMBER
220303 09/25/2014	(573) 324-3200

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 13010 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on January 14, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1218% (w/vol) ethyl alcohol. The expiration date for this lot number is January 9, 2015 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol ding of 0.100 g/210L +/- 3%.

water used in this solution were substances.

Ted L. Pauley, President
GUTH LABORATORIES, INC.

CERTIFIED ALCOHOL REFERENCE SOLUTION FOR SIMULATOR

13010	1/9/13	1/9/15
LOT NO.	MFG. DATE	EXP. DATE
275 Gal.	500 ML	
LOT VOL.	BOT. VOL.	BOT. NO.

When this reference solution is used with a breath mulator certified by Guth Laboratories, a properly erating instrument will read 0.10
r additional information contact:
uth Laboratories, Inc.
0 North 67th Street, Harrisburg, PA 17111
ll Free 800-233-2338
v. 4/02

eference Standard lot number FN122211-02 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.

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
BOWLING GREEN POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 931124
08/31/13

TESTING OFFICER:
OWEN/R/E
OFFICER I.D.: 530
PERMIT NUMBER: 220303
EXPIRATION DATE: 09/25/14
MISCELLANEOUS DATA:
MAINTENANCE CHECK

---- SUPERVISOR MODE ----

BLANK TEST	.000	08:32
INTERNAL STANDARD	VERIFIED	08:32
EXTERNAL STANDARD	.099	08:32
BLANK TEST	.000	08:33
EXTERNAL STANDARD	.098	08:33
BLANK TEST	.000	08:34
EXTERNAL STANDARD	.099	08:34
BLANK TEST	.000	08:35

N = 3
SIM. = .1
AVG. = .0986

rator Signature R. E. Owen #53

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
BOWLING GREEN POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 931124
08/31/13
08:29

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM (04-07-2009):	OKAY
HEATERS SAMPLE CHAMBER:	48c
FLOW DETECTOR:	OKAY
PUMP HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST
!"#$%&'()*+,-./0123456789:;<=>?eABCDEFG
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmno
pqrstuvwxyz{|}→←

Operator Signature R. E. Owen #530

DataMaster
lence Ticket

E OF MISSOURI
EN POLICE DEPARTMENT

R SERIAL NUMBER 931124
08/31/13

1:00

SEX: M

/XXX
CER:

530
R:

530
220303
E: 09/25/14
DATA:

EATH ANALYSIS ---

	.000	08:37
ARD	VERIFIED	08:37
ENCE		

R. E. Owen #53

State of Missouri
DEPARTMENT OF HEALTH

PERMIT
TYPE II

RODNEY E OWEN

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 09/25/2012

Number **220303**

Expires 09/25/2014

Director of State Public Health Laboratory

Director, Department of Health

MO 580-0771 (7-88)

Lab. 4 (R7-88)