

Department of Forensic Science
Breath Alcohol Section
Instrument Location History
1/1/1990 To 7/22/2014

AMS
MMB

Instrument Serial Number: 010464

As of 22-Jul-14

Start Date	End Date	Agency Name
22-Jul-14		DFS Central Lab
16-Jul-14	22-Jul-14	Loudoun County SO
18-Jun-14	16-Jul-14	DFS Central Lab
07-Jan-14	18-Jun-14	Franklin County SO
28-Dec-12	07-Jan-14	DFS Central Lab
14-Dec-11	28-Dec-12	Fairfax County PD
13-Oct-11	14-Dec-11	DFS Central Lab
20-Sep-10	13-Oct-11	Loudoun County SO
05-Aug-09	20-Sep-10	DFS Central Lab
17-Oct-08	05-Aug-09	Amelia County SO
08-May-08	17-Oct-08	DFS Central Lab

**INTOX EC/IR II
Quality Assurance Worksheet**

*AMS
mmB*

Instrument Serial Number 010464 Worksheet Start Date 7/22/2014
 Location Loudoun County Jail
 Address 42035 Loudoun Center Place, Leesburg, VA 20175
 DFS Technician Heather Stanton License No. 18910
 Laboratory On-Site

Site Specification: No detrimental environmental conditions exist.

Instrument Barometer (mm HG) 757 Reference Barometer (mm HG) 761
 Reference Barometer(RB)Serial # 009113 RB Calibration Due 4/28/2015

Measurement Assurance Check

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.300		-0.003	0.003	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.100		-0.003	0.003	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Dry gas standard Lot No. (with tank no.) AG407801-10

- Replaced dry gas standard (+O-ring)
 - Installed at Location
 - Removed to DFS-Central
- Supplies
 Mouthpieces
 Certificates of Analysis
 Operator Worksheet
 Other:



Notes:

Unable to perform instrument test and measurement assurance checks due to set solenoid error message.

*error
AMS
7/24/14*

Instrument Serial Number

010464

Certification Date

Calibrated

Certified

Measurement Assurance Check

Instrument Test

Troubleshooting/Maintenance Worksheet Completed

(Successful completion denotes satisfactory condition of the item.)

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.250		0.000	0.000	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.150		0.000	0.000	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.080		-0.003	0.003	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

Standard (sea level)	PA Target	minimum	maximum	Sample 1
0.020		-0.003	0.003	Sample 2
Precision		sample min	sample max	Sample 3
0		0.000	0.000	

All measurements are in g/210L

Estimation of Uncertainty of Measurement and traceability records are located within the Breath Alcohol Section

DFS Technician

Heath M. Starch

Date

7/22/14 7/24/14 HNS

Issuing Analyst

Michelle Bellon

Date

7/24/14

TLW

AMS
mmB



COMMONWEALTH OF VIRGINIA
DEPARTMENT OF FORENSIC SCIENCE

CERTIFICATE OF BLOOD ALCOHOL ANALYSIS
AS DETERMINED BY A CHEMICAL TEST OF THE ACCUSED'S BREATH

NAME OF ACCUSED INSTRUMENT, TEST,	NAME OF COURT DFS
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BREATH ANALYSIS

SAMPLE EXAMINED AND TEST CONDUCTED BY STANTON, HEATHER, M		AGENCY DFS Central Lab
DFS LICENSE NUMBER 18910	LICENSE EXPIRES 10/01/2014	DATE TEST CONDUCTED 07/22/2014
TEST EQUIPMENT NUMBER 010464		

RESULTS: TIME SAMPLE TAKEN 10:44 EDT

SAMPLE'S ALCOHOL CONTENT Set solenoid error GRAMS PER 210 LITERS OF BREATH

ATTEST:

I CERTIFY THAT THE ABOVE IS AN ACCURATE RECORD OF THE TEST CONDUCTED; THAT THE TEST WAS CONDUCTED WITH THE TYPE OF EQUIPMENT AND IN ACCORDANCE WITH THE METHODS APPROVED BY THE DEPARTMENT OF FORENSIC SCIENCE; THAT THE TEST WAS CONDUCTED IN ACCORDANCE WITH THE DEPARTMENT'S SPECIFICATIONS; THAT PRIOR TO ADMINISTRATION OF THE TEST THE ACCUSED WAS ADVISED OF HIS RIGHT TO OBSERVE THE PROCESS AND SEE THE BLOOD ALCOHOL READING ON THE EQUIPMENT USED TO PERFORM THE BREATH TEST, AND THAT I POSSESS A VALID LICENSE TO CONDUCT SUCH TEST, GIVEN UNDER MY HAND THIS _____ DAY OF _____, 20 _____.

BREATH TEST OPERATOR

I HAVE RECEIVED A COPY OF THIS CERTIFICATE OF ANALYSIS _____ SUBJECT'S SIGNATURE

SUBJECT REFUSED TO SIGN FOR COPY OF CERTIFICATE OF ANALYSIS _____ OPERATOR'S SIGNATURE

FOR COURT



Handwritten initials/signature

Test Results

Instrument Serial Number 010464

Test # 001319	Subject Test	Test Location 2 Forensic Science	Test Location 3
Test Location 1 Department of		Test Time 10:44	System Check Passed
Test Date 22 Jul 2014		Remote/Local Local	
Operator's Last Name STANTON		Operator's First Name HEATHER	Operator's Middle Initial M
Agency DFS Central Lab		License Number 18910	
Card Serial Number 118910		Effective Date 10/01/2012	Expiration Date 10/01/2014
Subject's Last Name INSTRUMENT		Subject's First Name TEST	
Subject's Middle Initial		Subject's Date of Birth 00/00/0000	Subject's Sex Male
Driver's License Number		Driver's License Expiration 00/00/0000	
Driver's License State		Court Name DFS	
End Date 22 Jul 2014	End Time 10:44	Result Time 10:44	Result Date 22 Jul 2014
Data Type DIAG		Sample Value Pass	Sample Time 10:44
Data Type BLK		Sample Value *.***	Sample Time 10:44
Data Type BLK		Sample Value *.***	Sample Time 10:44
Tamper Evident Stamp 186e30ba			Test Status Code 11
Test Status Set solenoid error			

Department of Forensic Science
Breath Alcohol Section
Trouble Call Log
7/19/2014 To 7/23/2014

HMS
MMB

Instrument Serial Number: 010464

23-Jul-14

Date: 19-Jul-14 **Time:** 4:56 AM **Remote:** True **Tech:** HMS (18910) **Location:** Loudoun County SO

Indication: INSTRUMENT DISPLAYING "SET SOLENOID ERROR" MESSAGE

Problem: INSTRUMENT DISPLAYING "SET SOLENOID ERROR" MESSAGE

Technician Response: SITE VISIT CONDUCTED.

Resolution: REMOVED TO DFS-Central
