



Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 30 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.

**REVIEWED**

By Carol Day at 4:07 pm, Mar 31, 2014

DATAMASTER SN 204169	NAME OF AGENCY MSHP - Troop H	DATE OF INSPECTION 02/28/2014
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LOCATION OF INSTRUMENT (STREET AND CITY) Cameron Police Department	TIME OF INSPECTION 8:40 am
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**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.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) 02/28/2014 0840
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 50 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER

 INDICATOR LIGHTS

<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER <u>Gulth Laboratories</u>	LOT # <u>13280</u>	EXP. DATE <u>10/16/2015</u>
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<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34.1</u> °C	SIMULATOR SN <u>G11063</u>	EXP. DATE <u>02/13/2015</u>
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 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  .096	TEST 2  .098	TEST 3  .098
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 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	(0-.04)	0	(.05-.09)	0	(.10-.14)	1	(.15-.19)	0	OVER .19	1
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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).

**INSPECTING OFFICER**

SIGNATURE 	PRINT FULL NAME Tpr. J. M. Cross
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TYPE II PERMIT NUMBER/EXPIRATION DATE 230017 02/08/2015	TELEPHONE NUMBER (816) 387-2345
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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



**GUTH LABORATORIES, INC.**

580 NORTH 67th STREET • HARRISBURG, PA 17111-4611 • TELEPHONE: 717-564-5470

## CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13280 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on October 18, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1217% (w/vol) ethyl alcohol. The expiration date for this lot number is October 16, 2015 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 0.100 g/210L +/- 3%.

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

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

***NIST Traceability:***

*Testing was conducted using Cerilliant Reference 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.*

**BAC DataMaster**  
**Evidence Ticket**

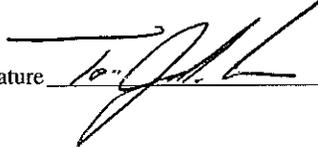
MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 204169  
02/28/14

TESTING OFFICER:  
CROSS/J/M  
OFFICER I.D.: 446  
PERMIT NUMBER: 230017  
EXPIRATION DATE: 02/08/15  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	08:53
INTERNAL STANDARD	VERIFIED	08:53
EXTERNAL STANDARD	.096	08:53
BLANK TEST	.000	08:54
EXTERNAL STANDARD	.098	08:54
BLANK TEST	.000	08:55
EXTERNAL STANDARD	.098	08:55
BLANK TEST	.000	08:56

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

Operator Signature 

**BAC DataMaster**  
**Evidence Ticket**

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 204169  
02/28/14  
08:40

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY  
PROGRAM (04-07-2009): OKAY  
HEATERS  
SAMPLE CHAMBER: 50c  
FLOW DETECTOR: OKAY  
PUMP  
HIGH SPEED: OKAY  
DETECTOR: OKAY  
FILTERS: OKAY  
QUARTZ STANDARD: OKAY  
CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEFGH  
IJKLMNOPQRSTUVWXYZ[\]^\_`abcdefghijklmnop  
qrstuvwxyz{|}~

Operator Signature



**BAC DataMaster**  
**Evidence Ticket**

MISSOURI STATE HIGHWAY PATROL  
BAC DATAMASTER SERIAL NUMBER 204169  
02/28/14

ARREST TIME: 08:40  
SUBJECT NAME:  
TEST  
DOB: 01/01/01      SEX: M  
STATE/D.L.: NA/TEST  
ARRESTING OFFICER:  
TEST  
OFFICER I.D.: TEST  
TESTING OFFICER:  
CROSS/J/M  
OFFICER I.D.: 446  
PERMIT NUMBER: 230017  
EXPIRATION DATE: 02/08/15  
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

RADIO INTERFERENCE

Operator Signature





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



**PERMIT  
 TYPE II**

**JASON M CROSS**

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**DATAMASTER**

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 02/08/2013  
 NUMBER 230017  
 EXPIRES 02/08/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*David Vesterly*  
 Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

MO 580-0771 (6-10)