

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 STATE PUBLIC HEALTH LABORATORY  
 BREATH ALCOHOL PROGRAM  
**DATAMASTER MAINTENANCE REPORT**

**RECEIVED**  
 By Carol Day at 10:33 am, Oct 07, 2014 REPORT #8

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 940230	NAME OF AGENCY Canton Police Department	DATE OF INSPECTION 10/03/2014
LOCATION OF INSTRUMENT (STREET AND CITY) Canton Police Department, 108 N 5th Street, Canton, MO		TIME OF INSPECTION 10:16 pm

**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) <u>10/03/2014 22:16 HOURS</u>
<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 <u>49</u> °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

<input checked="" type="checkbox"/> INDICATOR LIGHTS
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER <u>Guth Laboratories, Inc.</u> LOT # <u>14110</u> EXP. DATE <u>05/01/2016</u>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34</u> °C SIMULATOR SN <u>SD2310</u> EXP. DATE <u>05/15/2015</u>

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)

<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 → .103	TEST 2 → .101	TEST 3 → .101
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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)	1	(.10-.14)	1	(.15-.19)	1	OVER .19	0
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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).

<b>INSPECTING OFFICER</b>	
SIGNATURE <i>Trooper K. M. Hoover #369</i>	PRINT FULL NAME Trooper K. M. Hoover #369
TYPE II PERMIT NUMBER/EXPIRATION DATE 240171 04/22/2016	TELEPHONE NUMBER (660) 385-2132

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.

690 NORTH 9TH STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 14110 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on May 5, 2014, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1206% (w/vol) ethyl alcohol. The expiration date for this lot number is May 1, 2016 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.*

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
CANTON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 940230

10/03/14

22:16

--- 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:;<=>?@ABCDEFGHIJ  
KLMNOPQRSTUVWXYZ[\]^\_`abcdefg hijklmno  
pqrstuvwxyz{|}~

Operator Signature

*JPR KM Hoover #3609*

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
CANTON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 940200  
10/03/14

TESTING OFFICER:  
HOOVER/K/M  
OFFICER I.D.# 369  
PERMIT NUMBER: 240171  
EXPIRATION DATE: 04/22/16  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	22:21
INTERNAL STANDARD	VERIFIED	22:21
EXTERNAL STANDARD	.103	22:22
BLANK TEST	.000	22:23
EXTERNAL STANDARD	.101	22:24
BLANK TEST	.000	22:25
EXTERNAL STANDARD	.101	22:26
BLANK TEST	.000	22:27

N = 3  
SIM. = .1  
AVG. = .1016

Operator Signature

*TR K/M Hoover #369*

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
CANTON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 340230  
18/03/14

ARREST TIME: 09:00  
SUBJECT NAME:  
HOOVER/K/M  
DOB: 08/15/79 SEX: F  
STATE/D.L.: MO/12345  
ARRESTING OFFICER:  
HOOVER/K/M  
OFFICER I.D.: 369  
TESTING OFFICER:  
HOOVER/K/M  
OFFICER I.D.: 369  
PERMIT NUMBER: 240171  
EXPIRATION DATE: 04/22/16  
MISCELLANEOUS DATA:  
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	22:31
INTERNAL STANDARD	VERIFIED	22:31
RADIO INTERFERENCE		

Operator Signature

*IKR KM Hoover #369*