



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

**RECEIVED**  
 By Carol Day at 9:40 am, Sep 17, 2014  
 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 201181	NAME OF AGENCY Nevada Police Department	DATE OF INSPECTION 09/13/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 120 S Ash St., Nevada		TIME OF INSPECTION 4:26 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) 09/13/2014 16:27
<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 48°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 RepCo Marketing Inc LOT # 14001 EXP. DATE 04/30/2016	
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD22611 EXP. DATE 04/17/2015	
<input checked="" type="checkbox"/> 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 • .101	TEST 2 • .101	TEST 3 • .102
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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)	0	(.15-.19)	0	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).

**INSPECTING OFFICER**

SIGNATURE 	PRINT FULL NAME Jimmie Dye
TYPE II PERMIT NUMBER/EXPIRATION DATE 240164 04/22/2016	TELEPHONE NUMBER (417) 448-5100

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

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
NEVADA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201181  
09/13/14

TESTING OFFICER:  
DVE/JIMMIE  
OFFICER I.D.: 142  
PERMIT NUMBER: 240154  
EXPIRATION DATE: 04/22/16  
MISCELLANEOUS DATA:

---- SUPERVISOR MODE ----

BLANK TEST	.000	16:30
INTERNAL STANDARD	VERIFIED	16:30
EXTERNAL STANDARD	.101	16:30
BLANK TEST	.000	16:31
EXTERNAL STANDARD	.101	16:31
BLANK TEST	.000	16:32
EXTERNAL STANDARD	.102	16:32
BLANK TEST	.000	16:33

N = 3  
S.M. = .1  
AVG. = .1013

Operator Signature

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
NEVADA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201181  
09/13/14

ARREST TIME: 16:00  
SUBJECT NAME:  
REF TEST  
DOB: 09/13/14 SEX: M  
STATE/DIST: MO/1  
ARRESTING OFFICER:  
DVE/JIMMIE  
OFFICER I.D.: 142  
TESTING OFFICER:  
DVE/JIMMIE  
OFFICER I.D.: 142  
PERMIT NUMBER: 240154  
EXPIRATION DATE: 04/22/16  
MISCELLANEOUS DATA:

---- BREATH ANALYSIS ----

BLANK TEST	.000	16:26
INTERNAL STANDARD	VERIFIED	16:26
SUBJECT SAMPLE	.000	16:26
RADIO INTERFERENCE		

Operator Signature

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
NEVADA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201181  
09/13/14  
16:27

---- DIAGNOSTIC CHECK ----

COMPUTER: OKAY

PROGRAM (94-07-2009): OKAY

HEATERS: 48c

SAMPLE CHAMBER: OKAY

FLOW DETECTOR: OKAY

PUMP: OKAY

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!@#%&'()\*+,-./0123456789:;<=>?@ABCDEF6  
HIJKLMNOPQRSTUVWXYZ[\]^\_`abcde fghijklmnop  
qrstuvwxy z{|}~

Operator Signature

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.  
LOT NUMBER: 14001  
EXPIRATION DATE: April 30, 2016 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

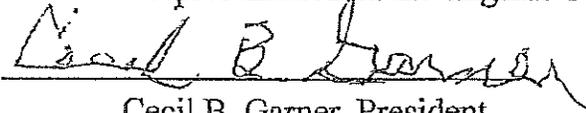
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 14001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1216 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

This solution will produce a vapor alcohol value of .100 +/- 3% gms/210L Breath when heated to 34 Degrees Celsius +/- 0.2 Degrees Celsius in a simulator (95% Confidence).

The date of manufacture for this lot number is May 1, 2014  
The expiration date for this lot number is April 30, 2016 at 11:59 p.m.

This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President  
RepCo Marketing, Inc.



# Simulator Calibration Report

This calibration report is to certify the alcohol reference simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance with the standards set by the Missouri Department of Health and Senior Services Rules and Regulations: 19CSR 25-30.051 (4).

Checked: 4/17/2014      Expires: 04/17/2015  
Digital Therm. SN:094948  
MSC Tech:RW      Temp:34.02  
Agency:Nevada Police Dept  
SD 2261



Technician Printed Name:

ROBERT WELSH

Technician Signature:

Date:

04/17/2014

Contact: Missouri Safety Center

Breath Alcohol Instrument Training Program

660-543-4834



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

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**PERMIT  
 TYPE II**

**JIMMIE G DYE**

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 4/22/2014

NUMBER 240164

EXPIRES 4/22/2016

MO 520-0771 (6-10)

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-1 (R6-10)