



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

RECEIVED

By Carol Day at 2:30 pm, Mar 31, 2014

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 201182	NAME OF AGENCY Hollister Police Department	DATE OF INSPECTION 03/30/2014
LOCATION OF INSTRUMENT (STREET AND CITY) #1 Gage Drive, Hollister		TIME OF INSPECTION 8:56 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>03/30/14, 2056 hrs.</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>RepCo Marketing Inc.</u> LOT # <u>13002</u> EXP. DATE <u>06/19/2015</u>

<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34.0</u> °C SIMULATOR SN <u>SD2732</u> EXP. DATE <u>08/23/2014</u>

<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 ➔ <u>.097%</u>	TEST 2 ➔ <u>.098%</u>	TEST 3 ➔ <u>.098%</u>
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<input checked="" type="checkbox"/> 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	3	(0-.04)	0	(.05-.09)	1	(.10-.14)	0	(.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).

Instrument Operating within DOHSS Specs and guidelines

INSPECTING OFFICER

SIGNATURE <i>Timothy E. Matthews</i>	PRINT FULL NAME Sgt. Timothy E. Matthews
TYPE II PERMIT NUMBER/EXPIRATION DATE 220253 09/11/2014	TELEPHONE NUMBER (417) 334-6565

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

REPCO MARKETING INC.3101428 STONYBROOK DRIVE
RALPH, N.C. 27604
919-576-5480

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.

LOT NUMBER: 13002

EXPIRATION DATE: June 19, 2015 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13002 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 .1217 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 June 20, 2013
The expiration date for this lot number is June 19, 2015 at
11:59 p.m.

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



Cecil B. Garner, President
RepCo Marketing, Inc.

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
HOLLISTER POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER SERIAL
03/30/14

TESTING OFFICER:
MATTHEW MATTHEWS
OFFICER I.D.# 582
PERMIT NUMBER: 200258
EXPIRATION DATE: 04/11/14
MISCELLANEOUS DATA:

--- SUPERVISOR NOTE ---

BLANK TEST	.000	21:17
INTERNAL STANDARD	VERIFIED	21:17
EXTERNAL STANDARD	.007	21:17
BLANK TEST	.000	21:18
EXTERNAL STANDARD	.000	21:18
BLANK TEST	.000	21:19
EXTERNAL STANDARD	.000	21:19
BLANK TEST	.000	21:20

N = 3
SIM. = .1
SVC. = .0976

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
HOLLISTER POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER SERIAL
03/30/14
20158

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM (04-07-2009):	OKAY
HEATERS	
SAMPLE CHAMBER:	45c
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST

! " # \$ % ' () * + , - . / 0 1 2 3 4 5 6 7 8 9 : ; < = > ? @ A B C D E F G
H I J K L M N O P Q R S T U V W X Y Z [\] ^ _ ` a b c d e f g h i j k l m n o
p q r s t u v w x y z { | } ~

Operator Signature *Jim Matthews*

Operator Signature *Jim Matthews*

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
HOLLISTER POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201102
03/30/14

ARREST TIME: 19:09

SUBJECT NAME:

TEST

DOB: 03/09/09 SEX: M

STATE/D.L.I. MO/111

ARRESTING OFFICER:

TEST/JOE

OFFICER I.D.:

TESTING OFFICER:

MATTHEWS/TVE

OFFICER I.D.: 902

PERMIT NUMBER: 800253

EXPIRATION DATE: 09/11/14

MISCELLANEOUS DATA:

RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	2102
INTERNAL STANDARD	VERIFIED	2102
RADIO INTERFERENCE		

Operator Signature *Jim Matthews*

State of Missouri
DEPARTMENT OF HEALTH



P E R M I T
T Y P E I I



TIMOTHY E MATTHEWS

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 09/11/2012

Number 220253

Expires 09/11/2014

MO 680-0771 (7-98)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-98)