



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

received 8/4/14-<sup>REPORT #6</sup>

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.

**REVIEWED**  
By Carol Day at 10:42 am, Aug 14, 2014

DATAMASTER SN <b>201203</b>	NAME OF AGENCY <b>Chaffee Police Department</b>	DATE OF INSPECTION <b>07-28-2014</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>222 W. Yoakum Ave Chaffee</b>		TIME OF INSPECTION <b>10:31</b>

**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) <b>07-28-14 at 10:31 hrs</b>
<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 <b>+49</b> °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 <b>RepCo Marketing</b> LOT # <b>13002</b> EXP. DATE <b>6-19-15</b>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <b>+34.0</b> °C SIMULATOR SN <b>SD2228</b> EXP. DATE <b>3-18-15</b>

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 • <b>.096</b>	TEST 2 • <b>.095</b>	TEST 3 • <b>.096</b>
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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 <b>1</b> (0-.04)	<b>2</b> <sup>0.08</sup> (.05-.09)	<b>0</b> (.10-.14)	<b>2</b> (.15-.19)	<b>0</b> OVER .19
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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 <b>William J. Sammut</b>	PRINT FULL NAME <b>William J. Sammut</b>
TYPE II PERMIT NUMBER/EXPIRATION DATE <b>230025</b>	TELEPHONE NUMBER <b>(573) 887-6911</b>

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**

**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:

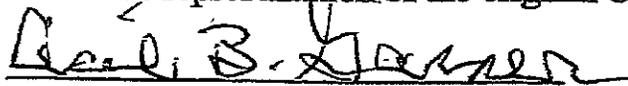
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1217 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

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.



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



**PERMIT**  
**TYPE II**

**WILLIAM J SAMMUT**

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

**DATA MASTER**

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 230026

EXPIRES 02/08/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*W. J. Sammut*  
*Paul Vanderley*

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
CHAFFEE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201203  
07/28/14  
10:31

--- 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[\]^\_`abcdefghijklmnop  
qrstuvwxyz{|}~

Operator Signature

*W. Summit*

SEMO  
OPS 522

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
CHAFFEE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201203  
07/28/14

TESTING OFFICER:  
SAMMUT/WILLIAM/J  
OFFICER I.D.: 521 SEMO  
PERMIT NUMBER: 230026  
EXPIRATION DATE: 02/08/15  
MISCELLANEOUS DATA:  
JULY 2014 MAINT REPORT  
CHAFFEE PD

--- SUPERVISOR MODE ---

BLANK TEST	.000	10:46
INTERNAL STANDARD	VERIFIED	10:46
EXTERNAL STANDARD	.096	10:47
BLANK TEST	.000	10:47
EXTERNAL STANDARD	.095	10:48
BLANK TEST	.000	10:48
EXTERNAL STANDARD	.096	10:49
BLANK TEST	.000	10:49

N = 3  
SIM. = .1  
AVG. = .0956

Operator Signature

*W. Sammut* SEMO  
DPS 521

Face This Side Down - This Edge In First

**BAC DataMaster  
Evidence Ticket**

STATE OF MISSOURI  
CHAFFEE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201203  
07/28/14

ARREST TIME: 10:00  
SUBJECT NAME:  
TEST/TEST/TEST  
DOB: 01/01/01      SEX: M

STATE/D.L.: MO/123456

ARRESTING OFFICER:  
SAMMUT/WILLIAM/J  
OFFICER I.D.: SEMO 521

TESTING OFFICER:  
SAMMUT/WILLIAM/J  
OFFICER I.D.: SEMO 521

PERMIT NUMBER: 230026  
EXPIRATION DATE: 02/08/15

MISCELLANEOUS DATA:  
JULY 2014 MAINT REPORT  
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	10:57
INTERNAL STANDARD	VERIFIED	10:58
RADIO INTERFERENCE		

Operator Signature W. Sammut SEMO: DPS 521