

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

RECEIVED
 By Carol Day at 10:50 am, May 29, 2014

REPORT #

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

IDENTIFICATION # 201214	NAME OF AGENCY HAYTE Police Dept.	DATE OF MAINTENANCE 5-29-14
LOCATION OF INSTRUMENT (STREET AND CITY) 300 EAST MAIN STREET HAYTE	ID# OF INSTRUMENT 0145	

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) 5-29-14 145A
<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 49 °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

SIMULATOR SOLUTION SUPPLIER: **Repro** LOT # **13002** EXP. DATE **6-19-15**

SIMULATOR TEMP (34°C ± 0.2°C) **34.00** °C SIMULATOR SN **S03503** EXP. DATE **07/10/14**

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

0.050% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE

0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 = **.098** TEST 2 = **.098** TEST 3 = **.099**

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 \emptyset (0-.04) \emptyset (.05-.09) \emptyset (.10-.14) \emptyset (.15-.19) \emptyset OVER .19 \emptyset

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: **DAVID MCELLEN** PRINT FULL NAME: **DAVID MCELLEN**

IDENTIFICATION NUMBER: **270239** EXPIRATION DATE: **05-13-16** TELEPHONE NUMBER: **573-359-1259**

RETURN COMPLETED REPORT TO THE: **Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
 2675 James Blvd.
 Poplar Bluff, MO 63901**

REPCO MARKETING INC.

4-27-14
RECEIVED

3101-188 STONYBROOK DRIVE
RALEIGH, N.C. 27604
919-976-5480

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 +/-0.003 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
HAYTI POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201214
05/29/14
01:45

--- DIAGNOSTIC CHECK ---

- COMPUTER: OKAY
- PROGRAM (04-07-2004): OKAY
- HEATERS
- SAMPLE CHAMBER: ARE
- FLOW DETECTOR: OKAY
- PUMP
- HIGH SPEED: OKAY
- DETECTOR: OKAY
- FILTERS: OKAY
- QUARTZ STANDARD: OKAY
- CALIBRATION: OKAY

PRINTER TEST

1#%& *+,-./0123456789:;@ABCDEFGHIJK
HIJKLMNOPQRSTUVWXYZ[\]^_`abcd efghijklmno
pqrstuvwxy z{|}~

OPERATOR SIGNATURE 

CARD STK # 60036 REORDER ALL SUPPLIES FROM N.P.A.S.
2260 NORTH MAIN, MANSFIELD, OH 44903 419-526-6727 (N.P.A.S.)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
HAYTI POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201214
05/29/14

TESTING OFFICER:
YACIN DAVID
OFFICER I.D.: 506
PERMIT NUMBER: 240239
EXPIRATION DATE: 05/13/16
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	01:55
INTERNAL STANDARD	VERIFIED	01:55
EXTERNAL STANDARD	.098	01:56
BLANK TEST	.000	01:56
EXTERNAL STANDARD	.098	01:57
BLANK TEST	.000	01:57
EXTERNAL STANDARD	.099	01:58
BLANK TEST	.000	01:58

N = 3
SIM. = 1
AVG. = .0983

OPERATOR SIGNATURE



CARD STK #
60038

REORDER ALL SUPPLIES FROM N.P.A.S.
2260 NORTH MAIN, MANSFIELD, OH 44903 419-526-6727 (NPAS)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
HAYTI POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201214
05/29/14

ARREST TIME: 01:30
SUBJECT NAME:
TEST
DOB: 11/11/11 SEX: M
STATE D.L.: MO/11111111
ARRESTING OFFICER:
MACLIN DAVID
OFFICER I.D.: 506
TESTING OFFICER:
MACLIN DAVID
OFFICER I.D.: 506
PERMIT NUMBER: 240239
EXPIRATION DATE: 05/13/16
MISCELLANEOUS DATA:

— BREATH ANALYSIS —

BLANK TEST 000 02:03
INTERNAL STANDARD VERIFIED 02:03
RADIO INTERFERENCE

OPERATOR SIGNATURE



CARD STK # 60036 REORDER ALL SUPPLIES FROM NPAS
2260 NORTH MAIN, MANSFIELD, OH 44903 419-526-6727 (NPAS)



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



PERMIT
TYPE II
DAVID MACLIN

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

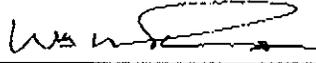
for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 5/13/2014

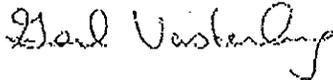
NUMBER 240239

EXPIRES 5/13/2016

MO 580-0771 (6-10)



DIRECTOR OF STATE PUBLIC HEALTH LABORATORY



acting director
DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)

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

INSTRUMENT OPERATOR CARD

The named cardholder is authorized to operate an evidential breath alcohol instrument for the determination of the alcoholic content in breath form of expired air in Missouri.



Operator **MACLIN, DAVID**
Permit No **240239**
Date Issued **5/13/2014** Date Expires **5/13/2016**