



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

RECEIVED
 By Carol Day at 3:48 pm, Aug 12, 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 201253	NAME OF AGENCY MINER POLICE DEPT.	DATE OF INSPECTION 08/03/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 103 ST HWY H, MINER, MO. 63801		TIME OF INSPECTION 10:10 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>08-03-14 22:13</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°C</u>	<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</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>SD2273</u> EXP. DATE <u>01/03/2015</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>.103</u>	TEST 2 <u>.103</u>	TEST 3 <u>.103</u>
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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)	1	(.05-.09)	1	(.10-.14)	1	(.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).
OPERATING WITHIN DOHSS STANDARDS

INSPECTING OFFICER	
SIGNATURE 	PRINT FULL NAME LANCE ASH
TYPE II PERMIT NUMBER 240149	TELEPHONE NUMBER (573) 471-8568

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.

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
MINER POLICE DEPARTMENT

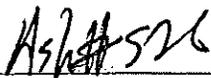
BAC DATAMASTER SERIAL NUMBER 201253
08/03/14

ARREST TIME: 21:30
SUBJECT NAME:
DOE/JOHN
DOB: 12/22/45 SEX: M
STATE/D.L.: MO/123456789
ARRESTING OFFICER:
ASH/LANCE
OFFICER I.D.: 526
TESTING OFFICER:
ASH/LANCE
OFFICER I.D.: 526
PERMIT NUMBER: 240149
EXPIRATION DATE: 04/22/16
MISCELLANEOUS DATA:
N
N

--- BREATH ANALYSIS ---

RADIO INTERFERENCE

Operator Signature



**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
MINER POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201253
08/03/14

TESTING OFFICER:
ASH/LANCE
OFFICER I.D.: 526
PERMIT NUMBER: 240149
EXPIRATION DATE: 04/22/16
MISCELLANEOUS DATA:
N
N

--- SUPERVISOR MODE ---

BLANK TEST	.000	22:16
INTERNAL STANDARD	VERIFIED	22:16
EXTERNAL STANDARD	.103	22:16
BLANK TEST	.000	22:17
EXTERNAL STANDARD	.103	22:18
BLANK TEST	.000	22:19
EXTERNAL STANDARD	.103	22:19
BLANK TEST	.000	22:20

N = 3
SIM. = .1
AVG. = .103

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
MINER POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201253
08/03/14
22:13

--- 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:;<=>?@ABCDEFGHIJK
LMNOPQRSTUVWXYZ[\]^_`abcdefghijklmnopqr
stuvwxyz{|}~

Operator Signature

Ash #526

2208-02

Operator Signature

Ash #526

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



PERMIT
TYPE II
JAMES L ASH

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, INTOXILYZER 5000

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 240149

EXPIRES 4/22/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 680-0721 (8/10)

LAB 4 (06/10)



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 ASH, JAMES
Permit No 240149
Date Issued 4/22/2014 Date Expires 4/22/2016