



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

RECEIVED
 By Carol Day at 2:13 pm, Jun 26, 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 201274	NAME OF AGENCY Eldon Police Department	DATE OF INSPECTION 06/23/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 111 South Oak, Eldon Mo 65026		TIME OF INSPECTION 3:39 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) 6/23/2014 1539pm
<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

<input checked="" type="checkbox"/> INDICATOR LIGHTS
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER <u>Guth Labs</u> LOT # <u>13280</u> EXP. DATE <u>10/16/2015</u>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34.0</u> °C SIMULATOR SN <u>SD2999</u> EXP. DATE <u>09/09/2014</u>

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 .097	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 2	(0-.04) 0	(.05-.09) 1	(.10-.14) 1	(.15-.19) 0	OVER .19 0
------------	-----------	-------------	-------------	-------------	------------

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 <i>Brian Kidwell</i>	PRINT FULL NAME Brian Kidwell
TYPE II PERMIT NUMBER/EXPIRATION DATE 230 304 12-11-2015	TELEPHONE NUMBER 573-392-5611
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: 12002

EXPIRATION DATE: August 29, 2014 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 12002 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 .1209 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 August 30, 2012
The expiration date for this lot number is August 29, 2014 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

2

PERMIT
TYPE II

BRIAN D KIDWELL

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 12/11/2013

NUMBER 230304

EXPIRES 12/11/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

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
ELDON POLICE DEPARTMENT

BAR DATAMASTER SERIAL NUMBER 201274
06/23/14

ARREST TIME: 15:00
SUBJECT NAME:
TLST
DOB: 12/12/86 SEX: M
STATE/D.I.: MO/12345
ARRESTING OFFICER:
KIDWELL/BRIAN/D
OFFICER I.D.: 806
TESTING OFFICER:
KIDWELL/BRIAN/D
OFFICER I.D.: 806
PERMIT NUMBER: 206394
EXPIRATION DATE: 12-11-15
DISCREPANCY DATA:
N

--- BREATH ANALYSIS ---

BLANK TEST	.000	15:50
INTERNAL STANDARD	VERIFIED	15:50
SUBJECT SAMPLE	.000	15:51
BLANK TEST	.000	15:52

OPERATOR SIGNATURE

Card No.

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901 PHONE 1-800-800-8143 (NPAS)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ELDON POLICE DEPARTMENT

BAR DATAMASTER SERIAL NUMBER 201274
06/23/14

ARREST TIME: 15:00
SUBJECT NAME:
TLST
DOB: 12/12/86 SEX: M
STATE/D.I.: MO/12345
ARRESTING OFFICER:
KIDWELL/BRIAN/D
OFFICER I.D.: 806
TESTING OFFICER:
KIDWELL/BRIAN/D
OFFICER I.D.: 806
PERMIT NUMBER: 206394
EXPIRATION DATE: 12-11-15
DISCREPANCY DATA:
N

--- BREATH ANALYSIS ---

BLANK TEST	.000	15:50
INTERNAL STANDARD	VERIFIED	15:50
SUBJECT SAMPLE	.000	15:51
BLANK TEST	.000	15:52

OPERATOR SIGNATURE

Card Stock No.
60020

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901 PHONE 1-800-800-8143 (NPAS)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
CLIFFORD POLICE DEPARTMENT

LAB. IDENTIFICATION NUMBER: 10435
DATE: 06/28/14

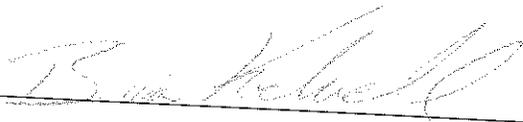
DIAGNOSTIC CHECK

CONDENSER	OKAY
PROBSONE (99-87-23890)	OKAY
HEATPAK	
SAMPLE CHAMBER	OKAY
FLOW DETECTOR	OKAY
PUMP	
PUMP SPEED	OKAY
DETECTORS	OKAY
PURVERS	OKAY
VALVE/STATION	OKAY
CONTAMINATION	OKAY

PRINTER TEST

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901 PHONE 1-800-800-8143 (NPAS)

SIGNATURE



REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901 PHONE 1-800-800-8143 (NPAS)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
CLIFFORD POLICE DEPARTMENT

LAB. IDENTIFICATION NUMBER: 10435
DATE: 06/28/14

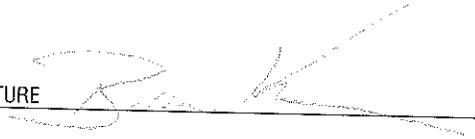
RESEARCHER: [blank]
LABORATORY: [blank]
LAB. NO. (I.D. NO.): 886
PROPERTY NUMBER: 200304
OPERATION DATE: 06/28/14
ANALYST: [blank]

SUBSTRATE ANALYSIS

ALCOHOL (%)	0.00%	0.00%
ACETONE (%)	0.00%	0.00%
METHANOL (%)	0.00%	0.00%
ETHANOL (%)	0.00%	0.00%
ISOPROPYL (%)	0.00%	0.00%
BUTANOL (%)	0.00%	0.00%

DATE: 06/28/14
TIME: 10:00 AM

OPERATOR SIGNATURE



Card Stock No.
60020

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901 PHONE 1-800-800-8143 (NPAS)