



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

January 2014

received 1/14/14 **REPORT #6**

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days) or 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 11:42 am, Feb 05, 2014

DATAMASTER SN 201276	NAME OF AGENCY Wentzville Police Department	DATE OF INSPECTION 01-04-2014
LOCATION OF INSTRUMENT (STREET AND CITY) 1019 Schroeder Creek Blvd - Wentzville, MO 63385		TIME OF INSPECTION 0423

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) 01/04/14 04:23
<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 48 °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 Repto Marketing LOT # 13002 EXP. DATE 6-19-15
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD2233 EXP. DATE 11-14-2014

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 • .099	TEST 3 • .099
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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 2 (0-.04) 0	(.05-.09) 0	(.10-.14) 0	(.15-.19) 1	OVER .19 0
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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 K. Bruns	PRINT FULL NAME Kyle Bruns
TYPE II PERMIT NUMBER/EXPIRATION DATE 230258 / 11-26-15	TELEPHONE NUMBER 636-327-5105

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**

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
WENTZVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201276
01/24/14
04:23

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM (04-07-2009): OKAY
HEATERS
SAMPLE CHAMBER: 48C
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
GURPITZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST
!##%&'()*+,-./0123456789:;<=>?@ABCDEFGHIJ
KLMNOPQRSTUVWXYZ[\]^_`abcd+ghijklmnop
qrstuvwxyz{|}~

OPERATOR SIGNATURE



CARD STK # 60036
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
WENTZVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201276
01/24/14

TESTING OFFICER:

BRUNS/KYLE/T
OFFICER I.D.: 242
PERMIT NUMBER: 230258
EXPIRATION DATE: 11/26/15
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST .000 04:25
INTERNAL STANDARD VERIFIED 04:26
EXTERNAL STANDARD .097 04:26
BLANK TEST .000 04:27
EXTERNAL STANDARD .099 04:27
BLANK TEST .000 04:28
EXTERNAL STANDARD .099 04:29
BLANK TEST .000 04:29

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

OPERATOR SIGNATURE



CARD STK # 60036
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
WENTZVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201276
01/04/14

ARREST TIME: 04:00
SUBJECT NAME:
RFI/TEST
DOB: 08/17/83 SEX: M
STATE/D.L.L: MO/MR
ARRESTING OFFICER:
NR
OFFICER I.D.: NR
TESTING OFFICER:
BRUNS/KYLE/T
OFFICER I.D.: 242
PERMIT NUMBER: 230258
EXPIRATION DATE: 11/26/15
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 04:32
INTERNAL STANDARD .000 VERIFIED 04:32
RADIO INTERFERENCE

OPERATOR SIGNATURE



CARD STK #

REORDER ALL SUPPLIES FROM N.P.A.S.

60036 2760 NORTH MAIN MANASSAHI N DU 4400 410 ENG 2707 ANNA

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
WENTZVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201276
01/04/14

ARREST TIME: 04:00
SUBJECT NAME:
SELF/TEST
DOB: 08/17/83 SEX: M
STATE/D.L.L: MO/MR
ARRESTING OFFICER:
NR
OFFICER I.D.: NR
TESTING OFFICER:
BRUNS/KYLE/T
OFFICER I.D.: 242
PERMIT NUMBER: 230258
EXPIRATION DATE: 11/26/15
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST .000 04:35
INTERNAL STANDARD .000 VERIFIED 04:35
SUBJECT SAMPLE .000 04:35
BLANK TEST .000 04:35

OPERATOR SIGNATURE



CARD STK #

REORDER ALL SUPPLIES FROM N.P.A.S.

60036 2760 NORTH MAIN MANASSAHI N DU 4400 410 ENG 2707 ANNA

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:

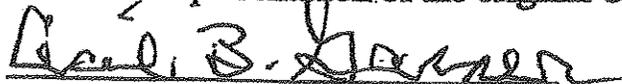
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1217 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

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

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PERMIT
TYPE II
KYLE T BRUNS

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, INTOX EC/IR II, ALCO-SENSOR IV W/PRINTER

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 11/26/2013

NUMBER 230258

EXPIRES 11/26/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

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 BRUNS, KYLE
 Permit No 230258
 Date Issued 11/26/2013 Date Expires 11/26/2015