



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

March 2014

received 3/5/14-cd

**REVIEWED** REPORT #6  
 By Carol Day at 2:52 pm, Mar 18, 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 <u>201276</u>	NAME OF AGENCY <u>Wentzville Police Dept-</u>	DATE OF INSPECTION <u>02/28/2014</u>
LOCATION OF INSTRUMENT (STREET AND CITY) <u>1019 Schroeder Creek Blvd Wentzville, MO 63385</u>		TIME OF INSPECTION <u>08:17</u>

**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>02/28/14 08:17</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</u> °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>Replo Marketing</u> LOT # <u>13002</u> EXP. DATE <u>06-19-15</u>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34.0</u> °C SIMULATOR SN <u>SD 2233</u> EXP. DATE <u>11-14-2014</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)

0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE  
 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE  
 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 - <u>.098</u>	TEST 2 - <u>.099</u>	TEST 3 - <u>.100</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 <u>3</u>	(.0-.04) <u>0</u>	(.05-.09) <u>0</u>	(.10-.14) <u>1</u>	(.15-.19) <u>1</u>	OVER .19 <u>1</u>
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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).

<b>INSPECTING OFFICER</b>	
SIGNATURE <u>K. Bruns</u>	PRINT FULL NAME <u>Kyle Bruns</u>
TYPE II PERMIT NUMBER/EXPIRATION DATE <u>230258 / 11-26-2015</u>	TELEPHONE NUMBER <u>636-327-5105</u>

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  
02/28/14  
08:17

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

OPERATOR SIGNATURE



CARD STK # REORDER ALL SUPPLIES FROM N.P.A.S.  
9920 NINDTU MAIN MANAGER I N NU 44009 410-526-6727 (NIPAS)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
WENTZVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201276  
02/28/14

TESTING OFFICER:

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

--- SUPERVISOR MODE ---

BLANK TEST .000 08:19  
INTERNAL STANDARD VERIFIED 08:19  
EXTERNAL STANDARD .098 08:20  
BLANK TEST .000 08:21  
EXTERNAL STANDARD .099 08:21  
BLANK TEST .000 08:22  
EXTERNAL STANDARD .100 08:22  
BLANK TEST .000 08:23

N = 3  
SIM. = .1  
RWG. = .099

OPERATOR SIGNATURE



CARD STK # REORDER ALL SUPPLIES FROM N.P.A.S.  
9920 NINDTU MAIN MANAGER I N NU 44009 410-526-6727 (NIPAS)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
WENTZVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201276  
02/28/14

ARREST TIME: 07:50

SUBJECT NAME:  
SELF/TEST

DOB: 01/02/50

SEX: M

STATE/D.L.: NR/NR

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	08:35
INTERNAL STANDARD	VERIFIED	08:35
SUBJECT SAMPLE	.000	08:35
BLANK TEST	.000	08:36

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  
02/28/14

ARREST TIME: 08:00

SUBJECT NAME:  
RFI/TEST

DOB: 08/17/83

SEX: M

STATE/D.L.: NR/NR

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	08:26
INTERNAL STANDARD	VERIFIED	08:26
RADIO INTERFERENCE		

OPERATOR SIGNATURE

CARD STK #  
60036

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

**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