

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

RECEIVED 2/14/14-CD

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 202011 NAME OF AGENCY MSHP DATE OF INSPECTION 2-9-14
LOCATION OF INSTRUMENT (STREET AND CITY) DENT CO JAIL TIME OF INSPECTION 1629

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.

- DIAGNOSTIC CHECK (PRINTOUT ATTACHED) DATE AND TIME (from printout) 2-9-14 1629
- COMPUTER DETECTOR
- PROGRAM FILTERS
- HEATERS SAMPLE CHAMBER 49 °C QUARTZ STANDARD
- FLOW DETECTOR CALIBRATION
- PUMP HIGH SPEED PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER REPCO MARKETING LOT # 13001 EXP. DATE 3-7-15

SIMULATOR TEMP (34°C ± 0.2°C) 34.01 °C SIMULATOR SN 0919 EXP. DATE 6-7-14

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

TEST 1 102% TEST 2 101% TEST 3 102%

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) 0 (.05-.09) 0 (.10-.14) 0 (.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).

OPERATING WITHIN MO/DHSS SPECIFICATIONS

INSPECTING OFFICER

SIGNATURE K.D. Wilmont

PRINT FULL NAME K.D. WILMONT

TYPE II PERMIT NUMBER/EXPIRATION DATE 220051 2-9-14

TELEPHONE NUMBER (573) 368-2345

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: 13001

EXPIRATION DATE: March 7, 2015 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13001 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 .1215 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 March 8, 2013
The expiration date for this lot number is March 7, 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



P E R M I T
TYPE II



KYLE D WILMONT

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 02/09/2012

Director of State Public Health Laboratory

Number 220051

Expires 02/09/2014

Director, Department of Health

MO 580-0771 (7-89)

Lab. 4 (87-89)

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
LABORATORY CONTROL NUMBER 2022011
DATE 06/14/14

TEST NAME: DRUG SCREEN
WALTON/KAUF
OFFICER: S. D. WILSON
PEPPER HARBOR ROAD
ESPRESSO DRIVE, BRIDGE
MICHIGANVILLE, MO

STANDARD NAME

DRUG TEST	.0000	164300
ETHANOL STANDARD	VENTILUB	164305
CANNABIS STANDARD	.1000	164306
DRUG TEST	.0000	164309
ETHANOL STANDARD	.1000	164304
DRUG TEST	.0000	164305
CANNABIS STANDARD	.1000	164306
DRUG TEST	.0000	164306

REAR
DRUG TEST
LABORATORY CONTROL

Operator Signature

K. D. Wilson

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE HIGHWAY PATROL
LABORATORY CONTROL NUMBER 2022011
DATE 06/14/14

TEST NAME: DRUG SCREEN
WALTON/KAUF
OFFICER: S. D. WILSON
PEPPER HARBOR ROAD
ESPRESSO DRIVE, BRIDGE
MICHIGANVILLE, MO
STANDARD NAME

DRUG TEST	.0000	164300
ETHANOL STANDARD	VENTILUB	164305
CANNABIS STANDARD	.1000	164306

Operator Signature

K. D. Wilson

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

MISSOURI STATE SECURITY PROGRAM
BAC DATA MASTER SERIAL NUMBER 000001
ISSUE DATE
10/29

IDENTIFICATION CODE

CASE NUMBER 000001

LABORATORY NUMBER 000001

DATE 10/29

LABORATORY NAME 000001

LABORATORY ADDRESS 000001

LABORATORY CITY 000001

LABORATORY STATE 000001

LABORATORY ZIP 000001

LABORATORY PHONE 000001

LABORATORY FAX 000001

LABORATORY EMAIL 000001

LABORATORY TYPE

LABORATORY TYPE: 000001
LABORATORY TYPE: 000001
LABORATORY TYPE: 000001

Operator Signature

