



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

received 8/1/14-^{REPORT #6}cd

REVIEWED
 By Carol Day at 10:48 am, Aug 19, 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 203053	NAME OF AGENCY Hallsville Police Department	DATE OF INSPECTION 07/22/2014
LOCATION OF INSTRUMENT (STREET AND CITY) 202 Highway 124 East, Hallsville, MO 65255		TIME OF INSPECTION 10:57 am

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) 07/22/14 10:57
<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

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER RepCo Marketing, Inc. LOT # 14001 EXP. DATE 04/30/2016

SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN 093752 EXP. DATE 07/23/2014

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)

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 ➔ .098	TEST 2 ➔ .099	TEST 3 ➔ .100
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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)	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).

Instrument is operating satisfactory.

INSPECTING OFFICER	
SIGNATURE 	PRINT FULL NAME Edward (Tony) Fields
TYPE II PERMIT NUMBER/EXPIRATION DATE 240033 02/11/2016	TELEPHONE NUMBER (573) 696-3838

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

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
HALLSVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 203053
07/22/14

10:57

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[\]^_`abcdefg|hijklmno
pqrstuvwxy{|}~*

Operator Signature

2208-02

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
HALLSVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 203053
07/22/14

TESTING OFFICER:

FIELDS/EDWARD

OFFICER I.D.: 9014

PERMIT NUMBER: 240033

EXPIRATION DATE: 02/11/16

MISCELLANEOUS DATA:

----- SUPERVISOR MODE -----

BLANK TEST .000 11:00

INTERNAL STANDARD VERIFIED 11:00

EXTERNAL STANDARD .098 11:00

BLANK TEST .000 11:01

EXTERNAL STANDARD .099 11:01

BLANK TEST .000 11:02

EXTERNAL STANDARD .100 11:02

BLANK TEST .000 11:03

N = 3

SIM. = .1

AVG. = .099

Operator Signature

2208-02

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
HALLSVILLE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 203053
07/22/14

ARREST TIME: 10:45

SUBJECT NAME:

TEST/TEST/T

DOB: 06/06/66 SEX: M

STATE/D.L.: MO/12345

ARRESTING OFFICER:

FIELDS/EDWARD

OFFICER I.D.: 9014

TESTING OFFICER:

FIELDS/EDWARD

OFFICER I.D.: 9014

PERMIT NUMBER: 240033

EXPIRATION DATE: 02/11/16

MISCELLANEOUS DATA:

----- BREATH ANALYSIS -----

BLANK TEST .000 11:07

INTERNAL STANDARD VERIFIED 11:07

RADIO INTERFERENCE

Operator Signature

2208-0

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.

LOT NUMBER: 14001

EXPIRATION DATE: April 30, 2016 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

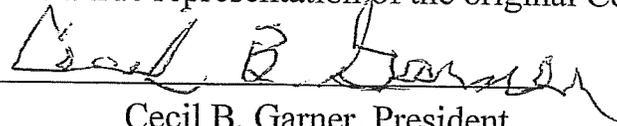
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 14001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1216 gms/dl +/-0.003 gms/dl wt/vol ethanol (95% Confidence).

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 May 1, 2014
The expiration date for this lot number is April 30, 2016 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

EDWARD A FIELDS

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 2/11/2014

NUMBER 240033

EXPIRES 2/11/2016

D 580-0771 (6-10)

[Signature]

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

[Signature]

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R6-10)