



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

RECEIVED 3/5/14-CD

**REVIEWED** REPORT #6  
 By Carol Day at 2:51 pm, Mar 31, 2014

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 30 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 204101	NAME OF AGENCY MISSOURI STATE HIGHWAY PATROL	DATE OF INSPECTION 02/23/2014
LOCATION OF INSTRUMENT (STREET AND CITY) PUTNAM COUNTY SHERIFF'S OFFICE, 1601 MAIN, UNIONVILLE, MO		TIME OF INSPECTION 6:06 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) 02/23/2016 1806 HOURS
<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 _____ 50°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 # 13001 EXP. DATE 03/07/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34 °C SIMULATOR SN G11077 EXP. DATE 10/28/2014

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 <input checked="" type="checkbox"/> .101	TEST 2 <input checked="" type="checkbox"/> .101	TEST 3 <input checked="" type="checkbox"/> .103
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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)	1	(.05-.09)	0	(.10-.14)	0	(.15-.19)	0	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).

MEETS DEPARTMENT OF HEALTH STANDARDS

<b>INSPECTING OFFICER</b>	
SIGNATURE 	PRINT FULL NAME REID T. FESSLER
TYPE II PERMIT NUMBER/EXPIRATION DATE 240018 01/28/2016	TELEPHONE NUMBER (660) 385-2132

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:

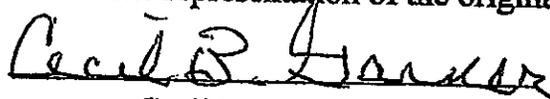
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1215 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

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 AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

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**PERMIT**  
**TYPE II**  
**REID T FESSLER**

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 1/28/2014

NUMBER 240018

EXPIRES 1/28/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

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 FESSLER, REID  
Permit No 240018  
Date Issued 1/28/2014 Date Expires 1/28/2016

# BAC DataMaster Evidence Ticket

# BAC DataMaster Evidence Ticket

MISSOURI STATE LABORATORY

MISSOURI STATE LABORATORY

BAC DATAMASTER SERIAL NUMBER 290187  
02.10.19

ANALYST: [illegible]  
PHONE: [illegible]

TESTING OFFICER:  
FESSLER, R/T  
OFFICE: [illegible]  
PERMIT NUMBER: 290187  
EXPIRATION DATE: [illegible]  
MISCELLANEOUS DATA:  
[illegible]

REQUEST TYPE: [illegible]  
SUBJECT: [illegible]  
TEST:  
DATE: [illegible]  
STATE: [illegible]  
DIRECTING OFFICER:  
FESSLER, R/T  
OFFICE: [illegible]  
TESTING OFFICER:  
FESSLER, R/T  
OFFICE: [illegible]  
PERMIT NUMBER: 290187  
EXPIRATION DATE: [illegible]  
MISCELLANEOUS DATA:  
[illegible]

--- SUPERVISOR SIGNATURE ---

DRUG TEST	✓	0000
INTERFER. STANDARD	✓	0000
EXTENDED STANDARD	✓	0000
BLIND TEST	✓	0000
EXTENDED STANDARD	✓	0000
BLIND TEST	✓	0000
EXTENDED STANDARD	✓	0000
BLIND TEST	✓	0000

--- BAC DATA MASTER ---

PERIC INTERFERENCE

1 - 3  
SUN - 11  
MAY - 1986

Operator Signature *R.T. Fessler*

Operator Signature *R.T. Fessler*

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

INSTRUMENT NO. \_\_\_\_\_

DATE OF ANALYSIS \_\_\_\_\_

LABORATORY NO. \_\_\_\_\_

ANALYST \_\_\_\_\_

CLIENT \_\_\_\_\_

TEST TYPE \_\_\_\_\_

RESULTS \_\_\_\_\_

REMARKS \_\_\_\_\_

OPERATOR \_\_\_\_\_

DATE \_\_\_\_\_

LABORATORY \_\_\_\_\_

CHIEF \_\_\_\_\_

STATE OF \_\_\_\_\_

DEPARTMENT OF \_\_\_\_\_

LABORATORY \_\_\_\_\_

OPERATOR \_\_\_\_\_

Operator Signature R.T. Fess