



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

**RECEIVED**

By Carol Day at 2:32 pm, Apr 01, 2014

REPORT #1

**INTOX DMT MAINTENANCE REPORT**

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.

|   |  |   |
|---|--|---|
| INTOX DMT SN<br><b>500025</b>   | NAME OF AGENCY<br><b>Sedalia Police Department</b> | DATE OF INSPECTION<br><b>03/22/2014</b> |
| LOCATION OF INSTRUMENT (STREET AND CITY)<br><b>201 W 2nd St, Sedalia MO</b> |  | TIME OF INSPECTION<br><b>13:32:31</b>   |

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or is operating within established limits. (Write in observed values where determined). Unmarked items must be corrected before using instrument.

**DIAGNOSTIC RECORD**

|  |   |
|--|---|
| DATE AND TIME <u>03/22/2014 13:32:33</u>                         | <input checked="" type="checkbox"/> DETECTOR          |
| <input checked="" type="checkbox"/> PROGRAM                      | <input checked="" type="checkbox"/> FILTER 1          |
| <input checked="" type="checkbox"/> SAMPLE CHAMBER <u>48.7°C</u> | <input checked="" type="checkbox"/> FILTER 2          |
| <input checked="" type="checkbox"/> BREATH TUBE <u>43.8°C</u>    | <input checked="" type="checkbox"/> FILTER 3          |
| <input checked="" type="checkbox"/> PUMP                         | <input checked="" type="checkbox"/> INTERNAL STANDARD |

**BREATH ANALYZER ACCURACY STANDARDS**

SIMULATOR STANDARD       COMPRESSED ETHANOL-GAS MIXTURE

STANDARD SUPPLIER REPCO      LOT # 1300213100      EXP. DATE 06/19/2015

SIMULATOR TEMP (34°C ± 0.2°C) 34.0      SIMULATOR SN SD2306      SIMULATOR EXP DATE 10/17/2014

**CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)**  
Run three tests using a standard. 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 being used.

0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE

0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE

0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1: **0.099**      TEST 2: **0.100**      TEST 3: **0.101**

**PERFORM R.F.I. TEST**

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:

|             |          |            |            |            |             |
|-------------|----------|------------|------------|------------|-------------|
| REFUSALS: 0 | 0-.04: 1 | .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)

*This is a new instrument for our Department and put into service on this date. This instrument conforms to the Department of Health standards.*

**INSPECTING OFFICER**

|  |  |
|--|--|
| SIGNATURE<br><i>Victoria A Kottman</i> | PRINT FULL NAME<br><b>VICTORIA A KOTTMAN</b> |
| TYPE II PERMIT NUMBER<br><b>230244</b> | EXPIRATION DATE<br><b>10/24/2015</b>         |
|  | TELEPHONE NUMBER<br><b>660-826-8100</b>      |

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:** 13002

**EXPIRATION DATE:** June 19, 2015 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

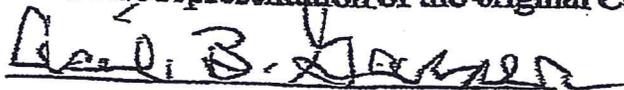
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1217 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

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**

**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** KOTTMAN, VICTORIA  
**Permit No** 230244  
**Date Issued** 10/24/2013 **Date Expires** 10/24/2015