



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

received 1/28/14-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.

**REVIEWED**  
 By Carol Day at 2:15 pm, Feb 04, 2014

DATAMASTER SN <b>931097</b>	NAME OF AGENCY <b>Lawson Police Department</b>	DATE OF INSPECTION <b>01-19-2014</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>104 W Third Street Lawson MO 64062</b>		TIME OF INSPECTION <b>1841</b>

**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) <b>01-19-14 1841</b>
<input checked="" type="checkbox"/> COMPUTER	<input type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER <b>49</b> °C	<input type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input type="checkbox"/> PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER **RepCo Marketing Inc** LOT # **13002** EXP. DATE **06-19-15**

SIMULATOR TEMP (34°C ± 0.2°C) **34.0** °C SIMULATOR SN **DR 5392** EXP. DATE **01/10/2015**

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 = <b>.099</b>	TEST 2 = <b>.098</b>	TEST 3 = <b>.099</b>
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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-.04) —	(.05-.09) —	(.10-.14) —	(.15-.19) —	OVER .19 —
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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).

**Conforms with DoHSS Standards**

<b>INSPECTING OFFICER</b>	
SIGNATURE <b>Cpl Bruce Summa 202</b>	PRINT FULL NAME <b>Cpl Bruce Summa 202</b>
TYPE/PERMIT NUMBER/EXPIRATION DATE <b>220319/09-28-2014</b>	TELEPHONE NUMBER <b>816 580 7210</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:

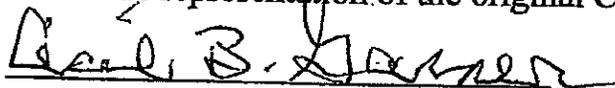
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1217 gms/dl +/-0.003 gms/dl wt/vol ethanol (95% Confidence).

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 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.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
LAWSON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 931097  
01/19/14  
18:41

--- 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 hijklmnop  
Pqrstuvwxyz{|}~++

OPERATOR SIGNATURE *Phil Bruce Sumner 202*  
D STK # 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  
LAWSON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 931097  
01/19/14

TESTING OFFICER:  
SUMMA/BRUCE/A  
OFFICER I.D.: 202  
PERMIT NUMBER: 220319  
EXPIRATION DATE: 09/28/14  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---  
BLANK TEST  
INTERNAL STANDARD  
EXTERNAL STANDARD  
BLANK TEST  
EXTERNAL STANDARD  
BLANK TEST  
EXTERNAL STANDARD  
BLANK TEST  
N = 3  
STDEV. = .1  
AVG. = .0986

OPERATOR SIGNATURE *Phil Bruce Sumner 202*  
CARD STK # REORDER ALL SUPPLIES FROM N.P.A.S.  
60036 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  
LAWSON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 931097  
01/19/14

ARREST TIME: 18:30  
SUBJECT NAME:  
RFI/TEST  
DOB: 11/23/45 SEX: M  
STATE/D.L.: MO/1234567  
ARRESTING OFFICER:  
SUMMA/BRUCE/A  
OFFICER I.D.: 202  
TESTING OFFICER:  
SUMMA/BRUCE/A  
OFFICER I.D.: 202

--- BREATH ANALYSIS ---  
BLANK TEST  
INTERNAL STANDARD  
RADIO INTERFERENCE  
N = 3  
STDEV. = .008  
AVG. = .0986

OPERATOR SIGNATURE *Phil Bruce Sumner 202*  
CARD STK # REORDER ALL SUPPLIES FROM N.P.A.S.  
60036 2260 NORTH MAIN, MANSFIELD, OH 44903 419-526-6727 (NPAS)

STATE OF MISSOURI  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



BRUCE SUMMA

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 09/28/2012

Number 220319

Expires 09/28/2014

MO 580-0771 (7-88)

Director of State Public Health Laboratory

Director, Department of Health

Lab. 4 (R7-88)