



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

RECEIVED
 By Carol Day at 12:13 pm, Sep 22, 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 931097	NAME OF AGENCY Lawson Police Department	DATE OF INSPECTION 09-19-2014
LOCATION OF INSTRUMENT (STREET AND CITY) 104 W Third St. Lawson MO 64062		TIME OF INSPECTION 1538

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) 09/19/14 15:38
<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 type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input type="checkbox"/> PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER **Repro marketing** LOT # **14001** EXP. DATE **04/30/2016**

SIMULATOR TEMP (34°C ± 0.2°C) **34.0** °C SIMULATOR SN **DR5392** 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 1 101	TEST 2 101	TEST 3 101
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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

INSPECTING OFFICER

SIGNATURE Sgt Bruce Summa 201	PRINT FULL NAME Sgt. Bruce Summa 201
TYPE & PERMIT NUMBER/EXPIRATION DATE 220319/09-28-2014	TELEPHONE NUMBER 816-580-7210

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: 14001
EXPIRATION DATE: April 30, 2016 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

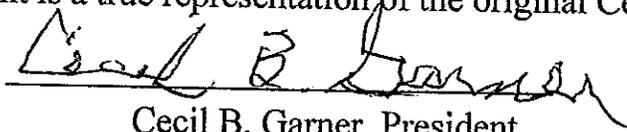
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 14001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1216 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

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.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
LAWSON POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 931097
09/19/14

TESTING OFFICER:
SUMMA/BRUCE/A
OFFICER I.D.: 201
PERMIT NUMBER: 220319
EXPIRATION DATE: 09/28/14
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST .000 15:44
INTERNAL STANDARD VERIFIED 15:44
EXTERNAL STANDARD .101 15:45
BLANK TEST .000 15:45
EXTERNAL STANDARD .101 15:46
BLANK TEST .000 15:46
EXTERNAL STANDARD .101 15:47
BLANK TEST .000 15:48

N = 3
SIM. = .1
AVG. = .101

ATOR SIGNATURE *Sgt Bruce Summa 201*
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 DATA MASTER SERIAL NUMBER 931097
09/19/14
15:38

--- 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:;<=>?@ABCDEF
HIJKLMNPOQRSTUVWXYZ[\]^_`abcdefshijklmno
pqrstuvwxyz{|}~*

OPERATOR SIGNATURE *Sgt Bruce Summa 201*
CARD 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 DATA MASTER SERIAL NUMBER 931097
09/19/14

ARREST TIME: 15:00
SUBJECT NAME:
RFI/TEST

JOB: 12/23/45 SEX: M

STATE/D.L.: MO/123456

ARRESTING OFFICER:
SUMMA/BRUCE/A

OFFICER I.D.: 201

TESTING OFFICER:
SUMMA/BRUCE/A

OFFICER I.D.: 201

PERMIT NUMBER: 220319

EXPIRATION DATE: 09/28/14

MISCELLANEOUS DATA:
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST .000 15:51
INTERNAL STANDARD VERIFIED 15:51
RADIO INTERFERENCE

OPERATOR SIGNATURE *Sgt Bruce Summa 201*
CARD STK # REORDER ALL SUPPLIES FROM N.P.A.S.
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

Director of State Public Health Laboratory

Director, Department of Health