



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

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.

DATAMASTER SN 931097	NAME OF AGENCY Lawson Police Department	DATE OF INSPECTION 10-20-2014
LOCATION OF INSTRUMENT (STREET AND CITY) 104 West Third Street Lawson MO 64062		TIME OF INSPECTION 1338

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) 10/20/14 13:38
<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 checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER **Repro Marketing Inc** LOT # **14001** EXP. DATE **04-30-16**

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 .102	TEST 2 .102	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 DOTSS standards.

INSPECTING OFFICER

SIGNATURE Sgt Bruce Summa 201	PRINT FULL NAME Sgt. Bruce Summa
TYPE II PERMIT NUMBER/EXPIRATION DATE 240362 10-03-2016	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 +/-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.

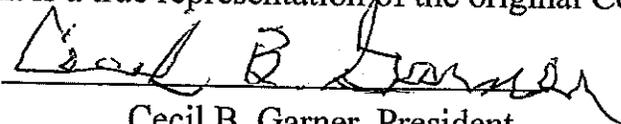
This solution will produce a vapor alcohol value of .100 +/-3% gms/210L Breath when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator (95% Confidence).

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.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
LAWSON POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 931097
10/20/14
13:38

--- 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:;<=>?@ABCDEFGHIJK
LMNOPQRSTUVWXYZ[\]^_`abcdefg hijklmno
pqrstuvwxyz{|}~**

OPERATOR SIGNATURE *Sgt. Bruce Summers 201*

REORDER ALL SUPPLIES FROM N.P.A.S.
2280 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
10/20/14

TESTING OFFICER:
SUMMA/BRUCE/A

OFFICER I.D.: 201
PERMIT NUMBER: 240362
EXPIRATION DATE: 10/03/16
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST .000 13:43
INTERNAL STANDARD VERIFIED 13:43
EXTERNAL STANDARD .102 13:43
BLANK TEST .000 13:44
EXTERNAL STANDARD .102 13:44
BLANK TEST .000 13:45
EXTERNAL STANDARD .101 13:45
BLANK TEST .000 13:45

N = 3

SIM. = .1

AVG. = .1016

OPERATOR SIGNATURE *Sgt. Bruce Summers 201*

REORDER ALL SUPPLIES FROM N.P.A.S.
2280 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
10/20/14

ARREST TIME: 13:00

SUBJECT NAME:
RFI/TEST

DOB: 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: 240362
EXPIRATION DATE: 10/03/16
MISCELLANEOUS DATA:
RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST .000 13:48
INTERNAL STANDARD VERIFIED 13:49
RADIO INTERFERENCE

OPERATOR SIGNATURE *Sgt. Bruce Summers 201*

REORDER ALL SUPPLIES FROM N.P.A.S.
2280 NORTH MAIN, MANSFIELD, OH 44903 419-526-6727 (NPAS)



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

2

PERMIT
TYPE II
BRUCE SUMMA

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 10/3/2014

NUMBER 240362

EXPIRES 10/3/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

,acting director

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 SUMMA, BRUCE
 Permit No 240362
 Date Issued 10/3/2014 Date Expires 10/3/2016