



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

**DATAMASTER MAINTENANCE REPORT**

**RECEIVED**

By Carol Day at 8:27 am, Apr 10, 2014

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 <b>960064</b>	NAME OF AGENCY <b>HOLTS Summit P.D.</b>	DATE OF INSPECTION <b>04-07-14</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>245 S. Summit Dr, Holts Summit</b>		TIME OF INSPECTION <b>10:41</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>04-07-14 / 10:41</b>
<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 <b>49</b> °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

<input checked="" type="checkbox"/> INDICATOR LIGHTS
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER <b>Retco Marketing Inc</b> LOT # <b>13002</b> EXP. DATE <b>6-19-15</b>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <b>34.6</b> °C SIMULATOR SN <b>503140</b> EXP. DATE _____

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	TEST 2	TEST 3
--------	--------	--------

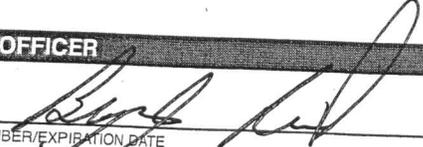
PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:  
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	<b>1</b> (0-.04)	<b>10</b> (.05-.09)	<b>—</b> (.10-.14)	<b>2</b> (.15-.19)	<b>—</b> OVER .19
----------	------------------	---------------------	--------------------	--------------------	-------------------

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).

**INSPECTING OFFICER**

SIGNATURE 	PRINT FULL NAME <b>BRYAN J. ROW</b>
TYPE II PERMIT NUMBER/EXPIRATION DATE <b>220407 / 12-20-14</b>	TELEPHONE NUMBER <b>573-896-4678</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

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II



BRYAN J REID

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 12/20/2012

Number 220407

Expires 12/20/2014

MO 580-0771 (7-88)

Director of State Public Health Laboratory

ACTING DIRECTOR

Director, Department of Health

Lab. 4 (R7-88)

**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:

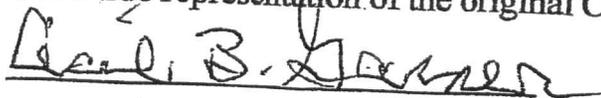
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1217 gms/dl +/- .003 gms/dl wt/vol ethanol (95% Confidence).

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.

**BAC DataMaster**  
**Evidence Ticket**

STATE OF MISSOURI  
HOLTS SUMMIT POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 960064  
04/07/14  
10:41

--- 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:;<=>?@ABCDEFGHIJ  
KLMNOPQRSTUVWXYZ[\]^\_`abcdefshijklmno  
pqr-stuvwxyz{|}~

Operator Signature \_\_\_\_\_



**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
HOLTS SUMMIT POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 960064  
04/07/14

ARREST TIME: 10:30  
SUBJECT NAME:  
TEST

DOB: 01/01/01      SEX: M

STATE/D.L.: MO/01001

ARRESTING OFFICER:

REID/BRYAN/J

OFFICER I.D.: 502

TESTING OFFICER:

REID/BRYAN/J

OFFICER I.D.: 502

PERMIT NUMBER: 220407

EXPIRATION DATE: 12/20/14

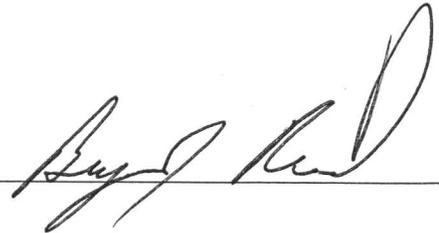
MISCELLANEOUS DATA:

RFI TEST

--- BREATH ANALYSIS ---

RADIO INTERFERENCE

Operator Signature



**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
HOLTS SUMMIT POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 960064  
04/07/14

TESTING OFFICER:  
REID/BRYAN/J  
OFFICER I.D.: 502  
PERMIT NUMBER: 220407  
EXPIRATION DATE: 12/20/14  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	10:45
INTERNAL STANDARD	VERIFIED	10:45
EXTERNAL STANDARD	.098	10:46
BLANK TEST	.000	10:46
EXTERNAL STANDARD	.098	10:47
BLANK TEST	.000	10:47
EXTERNAL STANDARD	.098	10:48
BLANK TEST	.000	10:48

N = 3  
SIM. = .1  
AVG. = .098

Operator Signature 