



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

RECEIVED
 By Carol Day at 4:11 pm, May 19, 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 960064	NAME OF AGENCY HOLTS Summit RD	DATE OF INSPECTION 5-18-14
LOCATION OF INSTRUMENT (STREET AND CITY) 245 S. Summit DR HOLTS Summit		TIME OF INSPECTION 11:04 AM

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) 05-18-14 / 11:04
<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
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> SIMULATOR SOLUTION SUPPLIER Repro Marketing Inc LOT # 13002 EXP. DATE 6-19-15	
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD 3140 EXP. DATE 01-27-15	

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 • .096	TEST 2 • .096	TEST 3 • .097
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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	1 (0-.04)	— (.05-.09)	— (.10-.14)	— (.15-.19)	1 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).

INSPECTING OFFICER	
SIGNATURE 	PRINT FULL NAME BRYAN J. REID
TYPE II PERMIT NUMBER/EXPIRATION DATE 220467 12-20-14	TELEPHONE NUMBER 573-898-8431

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

Director of State Public Health Laboratory

ACTING DIRECTOR

Director, Department of Health

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:

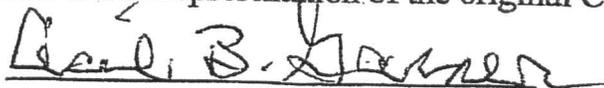
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13002 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1217 gms/dl +/-0.003 gms/dl wt/vol ethanol (95% Confidence).

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.

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
HOLTS SUMMIT POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 960064
05/18/14

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

--- SUPERVISOR MODE ---

BLANK TEST	.000	11:08
INTERNAL STANDARD	VERIFIED	11:08
EXTERNAL STANDARD	.096	11:09
BLANK TEST	.000	11:09
EXTERNAL STANDARD	.096	11:10
BLANK TEST	.000	11:10
EXTERNAL STANDARD	.097	11:11
BLANK TEST	.000	11:11

N = 3
SIM. = .1
AVG. = .0963

Operator Signature _____



BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
HOLTS SUMMIT POLICE DEPARTMENT

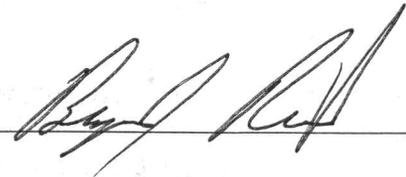
BAC DATAMASTER SERIAL NUMBER 960064
05/18/14

ARREST TIME: 10:30
SUBJECT NAME:
TEST
DOB: 01/01/01 SEX: M
STATE/D.L.: MO/010011
ARRESTING OFFICER:
REID
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
05/18/14
11:04

--- 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[\]^_`abcdefghijklmnopqrstuvwxyz{|}~
^_`abcdefghijklmnopqrstuvwxyz{|}~

Operator Signature _____

