



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

**RECEIVED**  
 By Carol Day at 4:12 pm, Jun 11, 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>990218</b>	NAME OF AGENCY <b>Fayette Police Dept.</b>	DATE OF INSPECTION <b>06/03/2014</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>100 N. Mulberry, Fayette Mo 65248</b>		TIME OF INSPECTION <b>9:42 am</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>06/03/2014 09:42</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 °C</b>	<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>Repro Marketing Inc.</b> LOT # <b>13001</b> EXP. DATE <b>03/07/2015</b>
<input checked="" type="checkbox"/> SIMULATOR TEMP ( <b>34</b> °C ± 0.2 °C) SIMULATOR SN <b>SD1115</b> EXP. DATE <b>01/14/2015</b>

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>.098</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	<b>2</b>	(.0-04)	<b>0</b>	(.05-.09)	<b>0</b>	(.10-.14)	<b>3</b>	(.15-.19)	<b>2</b>	OVER .19	<b>0</b>
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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).

Instrument operating with in Dept. of Health regulations.

<b>INSPECTING OFFICER</b>	
SIGNATURE <i>Greg T Lanham</i>	PRINT FULL NAME <b>Greg T. Lanham</b>
TYPE II PERMIT NUMBER/EXPIRATION DATE <b>230010 01/21/2015</b>	TELEPHONE NUMBER <b>(660) 248-2241</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: 13001**  
**EXPIRATION DATE: March 7, 2015 at 11:59 p.m.**

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 13001 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 .1215 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 March 8, 2013  
The expiration date for this lot number is March 7, 2015 at 11:59 p.m.

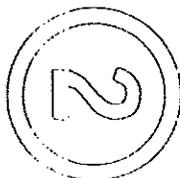
This document is a true representation of the original Certificate of Analysis.



Cecil B. Garner, President  
RepCo Marketing, Inc.



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



**PERMIT**  
**TYPE II**

**GREG T LANNHAM**

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 01/21/2013

NUMBER 230010

EXPIRES 01/21/2015

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
FAYETTE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 990218  
06/03/14

TEST TIME: 09:00  
SUBJECT NAME:  
SAMPLE  
DOB: 01/20/80 SEX: M  
DATE/D.L.: MO-00000000  
ARRESTING OFFICER:  
LANHAM/GREG/T  
OFFICER I.D.: 2  
TESTING OFFICER:  
LANHAM/GREG/T  
OFFICER I.D.: 2  
PERMIT NUMBER: 230010  
EXPIRATION DATE: 01/21/15  
MISCELLANEOUS DATA:

### BREATH ANALYSIS

BLANK TEST .000 09:46  
INTERNAL STANDARD VERIFIED 09:46  
AUTO INTERFERENCE

Operator Signature Greg T. Lanham #2

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
FAYETTE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 990218  
06/03/14  
09:46

ALCOHOLICITY: 0.000

COMPUTER: OKAY  
PROGRAM: 004 OF 00000: OKAY  
UNITS: 0.01  
SAMPLE NUMBER: 001  
FLOW METER: OKAY  
PUMP: OKAY  
VALVE: OKAY  
METER: OKAY  
FILTER: OKAY  
ALUMINUM: OKAY  
CALIBRATION: OKAY

PRINTED: 000

STATE OF MISSOURI, DEPARTMENT OF REVENUE  
BY AN INSTRUMENT DATED 06/03/14 AT 09:46  
IN THE COUNTY OF FAYETTE

Operator Signature Greg T. Lanham

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
FAYETTE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 998218  
06/03/14

TESTING OFFICER:  
LANHAM/GREG/T  
OFFICER I.D.# 2  
PERMIT NUMBER: 230010  
EXPIRATION DATE: 01/21/15  
MISCELLANEOUS DATA:

— SUPERVISOR MODE —

BLANK TEST	.000	09:50
INTERNAL STANDARD	VERIFIED	09:50
EXTERNAL STANDARD	.098	09:51
BLANK TEST	.000	09:52
EXTERNAL STANDARD	.098	09:52
BLANK TEST	.000	09:53
EXTERNAL STANDARD	.099	09:53
BLANK TEST	.000	09:54

TI = 3  
SIM. = .1  
AVG. = .0983

Operator Signature

*Greg T Lanham #2*