



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

RECEIVED REPORT #6
 By Carol Day at 5:41 am, Feb 24, 2015

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 201186	NAME OF AGENCY Rolla Police Department	DATE OF INSPECTION 02/23/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 1007 N. Elm Street, Rolla, Mo. 65401		TIME OF INSPECTION 1:14 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) 02/23/15 01:14
<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 <u>Repco Marketing, Inc.</u> LOT # <u>14001</u> EXP. DATE <u>04/30/2015</u>
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) <u>34</u> °C SIMULATOR SN <u>SD2725</u> EXP. DATE <u>07/22/2015</u>

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 ← .099	TEST 2 ← .099	TEST 3 ← .100
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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)	0	(.05-.09)	0	(.10-.14)	0	(.15-.19)	1	OVER .19	0
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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 <i>Kenneth L. Moberly</i>	PRINT FULL NAME Kenneth L. Moberly
TYPE II PERMIT NUMBER/EXPIRATION DATE 240314 07/30/2016	TELEPHONE NUMBER (573) 308-1213

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.

IN THE CIRCUIT COURT OF PHELPS COUNTY, MISSOURI
ASSOCIATE DIVISION

STATE OF MISSOURI, Plaintiff)
vs.) Case No. _____
_____, Defendant)

AFFIDAVIT PURSUANT TO SECTION 490.692 RSMo

Before me, the undersigned authority, personally appeared KENNETH L. MOBERLY, who, being by me duly sworn, deposes as follows: My name is KENNETH L. MOBERLY. I am of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated:

I am a "Type II Breathalyzer Operator," authorized by the Missouri Department of Health to carry out maintenance checks on a breathalyzer, and I am the custodian of the records of the breathalyzer for the Rolla Police Department, Rolla, Missouri. Attached hereto are _____ pages of records kept by the Rolla Police Department, Rolla, Missouri, in the regular course of business of the Rolla Police Department, Rolla, Missouri, for an employee or representative of the Rolla Police Department, Rolla, Missouri, with knowledge of the act, event, condition, opinion, or diagnosis recorded to make the records or to transmit information thereof to be included in such record; and the records was made at or near the time of the act, event, condition, opinion, or diagnosis. The records attached hereto are the original or exact duplicates of the original.

Kenneth L. Moberly
Affiant

In witness whereof I have hereunto subscribed my name and affixed my official seal this 23 day of February, 2015.

Charles Satterfield
Notary

My Commission Expires:

1-22-2018



CHARLES T. SATTERFIELD
My Commission Expires
January 22, 2018
Deer County
Commission #14425039

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
ROLLA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201186
02/23/15

TESTING OFFICER:
MOBERLY/KENNETH/L
OFFICER I.D.: 998
PERMIT NUMBER: 240314
EXPIRATION DATE: 07/30/16
MISCELLANEOUS DATA:
MONTHLY MAINTENANCE TEST

--- SUPERVISOR MODE ---

BLANK TEST	.000	01:18
INTERNAL STANDARD	VERIFIED	01:18
EXTERNAL STANDARD	.099	01:18
BLANK TEST	.000	01:19
EXTERNAL STANDARD	.099	01:20
BLANK TEST	.000	01:21
EXTERNAL STANDARD	.100	01:21
BLANK TEST	.000	01:22

N = 3
SIM. = .1
AVG. = .0993

Operator Signature

Kenneth L. Moberly

2208-02

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
ROLLA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201186
02/23/15

ARREST TIME: 01:00
SUBJECT NAME:
MOBERLY/KENNETH/L
DOB: 01/01/95 SEX: M
STATE/D.L.: MO/123456789
ARRESTING OFFICER:
MOBERLY/KENNETH/L
OFFICER I.D.: 998
TESTING OFFICER:
MOBERLY/KENNETH/L
OFFICER I.D.: 998
PERMIT NUMBER: 240314
EXPIRATION DATE: 07/30/16
MISCELLANEOUS DATA:
MONTHLY RFI TEST

--- BREATH ANALYSIS ---

BLANK TEST	.000	01:25
INTERNAL STANDARD	VERIFIED	01:25
RADIO INTERFERENCE		

Operator Signature

Kenneth L. Moberly

2208-02

Face This Side Down - This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
ROLLA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201186
02/23/15
01:14

--- 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[\]^_`abcdefg hijklmno
pqrstuvwxyz{|}~

Operator Signature

Kenneth L. Moloney

2208-02



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



PERMIT
TYPE II
KENNETH L MOBERLY

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 4/3/2014

NUMBER 240135

EXPIRES 4/3/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

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 **MOBERLY, KENNETH**
Permit No **240135**
Date Issued **4/3/2014** Date Expires **4/3/2016**