



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

**RECEIVED**  
 By Carol Day at 3:23 pm, Feb 19, 2016

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>201203</b>	NAME OF AGENCY <b>Chaffee Police Department</b>	DATE OF INSPECTION <b>12-29-2015</b>
LOCATION OF INSTRUMENT (STREET AND CITY) <b>222 W. Yorkum Ave Chaffee</b>		TIME OF INSPECTION <b>15:49 hours</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>12-29-2015 @ 15:49</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

INDICATOR LIGHTS

SIMULATOR SOLUTION SUPPLIER **Repro Marketing** LOT # **14001** EXP. DATE **4-30-2016**

SIMULATOR TEMP (34°C ± 0.2°C) \_\_\_\_\_ °C SIMULATOR SN **502228** EXP. DATE **3-12-2016**

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>.096</b>	TEST 2 • <b>.096</b>	TEST 3 • <b>.097</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>0</b>	(0-.04) <b>1</b>	(.05-.09) <b>0</b>	(.10-.14) <b>0</b>	(.15-.19) <b>0</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).  
**None.**

**INSPECTING OFFICER**

SIGNATURE <b>William Sammut</b>	PRINT FULL NAME <b>William Sammut</b>
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TYPE II PERMIT NUMBER/EXPIRATION DATE <b>250014 1-14-2017</b>	TELEPHONE NUMBER <b>(573) 887-6911</b>
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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**

Face This Side Down - This Edge In First

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
CHAFFEE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201203  
12/29/15  
15:49

--- 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[\]^\_`abcdefghijklmnop  
qrstuvwxyz{|}~

Operator Signature

*W. Summitt* SEMO  
DPS 521

Face This Side Down - This Edge In First

# BAC DataMaster Evidence Ticket

STATE OF MISSOURI  
CHAFFEE POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201203  
12/29/15

TESTING OFFICER:

SAMMUT/WILLIAM/J

OFFICER I.D.: SEMO 521

PERMIT NUMBER: 250014

EXPIRATION DATE: 01/14/17

MISCELLANEOUS DATA:

DECEMBER MAINT REPORT

CHAFFEE PD

--- SUPERVISOR MODE ---

BLANK TEST	.000	16:10
INTERNAL STANDARD	VERIFIED	16:10
EXTERNAL STANDARD	.096	16:11
BLANK TEST	.000	16:12
EXTERNAL STANDARD	.096	16:12
BLANK TEST	.000	16:13
EXTERNAL STANDARD	.097	16:13
BLANK TEST	.000	16:14

N = 3

SIM. = .1

AVG. = .0963

Operator Signature

*W. Sammut* SEMO  
DPS 521

**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:

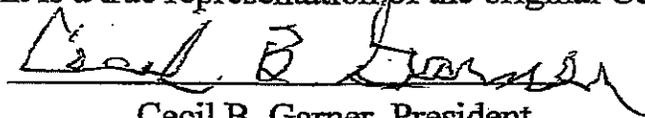
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 14001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1216 gms/dl +/-0.03 gms/dl wt/vol ethanol (95% Confidence).

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.



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

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**PERMIT**  
**TYPE II**

**WILLIAM J SAMMUTT**

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

**DATA MASTER**

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 1/14/2015

NUMBER 250014

EXPIRES 1/14/2017

  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

*David Vaden*  
 acting director  
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES