



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

REPORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 30 days) or
 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.

RECEIVED
 By Carol Day at 10:00 am, Jul 27, 2015

DATAMASTER SN 201239	NAME OF AGENCY Lebanon Police Department	DATE OF INSPECTION 07/22/2015
LOCATION OF INSTRUMENT (STREET AND CITY) 401 S. Jefferson Lebanon, Missouri 65536		TIME OF INSPECTION 7:18 pm

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) 07-22-2015 19:18
<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 RepCo Marketing LOT # 15001 EXP. DATE 05/20/2017
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD2755 EXP. DATE 07/15/2016

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 .099	TEST 2 .100	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	3	(.0-.04)	1	(.05-.09)	2	(.10-.14)	2	(.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).

Instrument is working within DOH specifications.

INSPECTING OFFICER

SIGNATURE 	PRINT FULL NAME Josh Fulton
TYPE II PERMIT NUMBER/EXPIRATION DATE 240287 06/19/2016	TELEPHONE NUMBER (417) 532-3131

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: 15001

EXPIRATION DATE: May 20, 2017 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 15001 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 .1206 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 May 21, 2015
The expiration date for this lot number is May 20, 2017 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
JOSH FULTON

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 6/19/2014

NUMBER 240287

EXPIRES 6/19/2016

DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 680-0771 (6-10)

LAB-4 (R6-10)



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 FULTON, JOSH
 Permit No 240287
 Date issued 6/19/2014 Date Expires 6/19/2016

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
LEBANON POLICE DEPARTMENT

OFF. BAC DATA MASTER SERIAL NUMBER 201209
07-22-15
19118

TESTER'S NAME: JOSHUA
OFFICER: JACOB
PERMIT NUMBER: 200000
ENTERED FOR OFFICE: 07-19-15
MISCELLANEOUS INFO:
TEST

--- SUPERVISOR NAME ---

BLANK TEST	.0000	19120
INTERNAL STANDARD	VARIFLEX	19120
EXTERNAL STANDARD	.0000	19127
BLANK TEST	.0000	19127
EXTERNAL STANDARD	.3000	19128
BLANK TEST	.0000	19128
EXTERNAL STANDARD	.1000	19129
BLANK TEST	.0000	19129

N = 8
S.D. = .11
AVG. = .0000

Signature _____

Face This Side Down - This Edge In First

BAC DataMaster Evidence Ticket

STATE OF MISSOURI
LEBANON POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 201209
07-22-15
19118

--- DIAGNOSTIC CHECK ---

COMPUTER	OKAY
PROGRAM (04-07-2000) 1	OKAY
HEATERS	
SAMPLE CHAMBERS	OK
FLOW DETECTORS	OKAY
PUMP	
HIGH SPEEDS	OKAY
DETECTORS	OKAY
FILTERS	OKAY
MURKIN STANDARD	OKAY
DRUG TEST	OKAY

PRELIMINARY TEST

abcdefghijklmnopqrstuvwxyz 1234567890
HIJKLMNOPQRS TUVWXYZ 1234567890
pqrs t uvwxyz 1234

Operator Signature _____

Face This Side Down - This Edge In First

**BAC DataMaster
Evidence Ticket**

STATE OF MISSOURI
LEBANON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201239
07-28-15

ARREST TIME: 10:00
SUBJECT NAME:
TEST
DOB: 09/09/44 SEX: M
STATE/D/L: MO/TEST
ARRESTING OFFICER:
TEST
OFFICER I.D.: 324
TESTING OFFICER:
FULTON, JOSHUA
OFFICER I.D.: 324
PERMIT NUMBER: 240287
EXPIRATION DATE: 06/19/16
MISCELLANEOUS DATA:
TEST

--- BREATH ANALYSIS ---

BLINK TEST	.000	19133
INTERNAL STANDARD	VERIFIED	19133
KNOWN INTERFERENCE		

Operator Signature

