



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

**RECEIVED**

By Carol Day at 8:58 am, Apr 10, 2015

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 30 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 201302	NAME OF AGENCY St. Joseph Police Department	DATE OF INSPECTION 04/07/15
LOCATION OF INSTRUMENT (STREET AND CITY) 501 Faraon St. Joseph MO 64501		TIME OF INSPECTION 1925

**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) 04/07/15 19:25
<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 oc	<input checked="" type="checkbox"/> QUARTZSTANDARD
<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 # 14001 EXRDATE 04-30-16	
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 34.0 oc SIMULATOR SN SD2278 EXP. DATE 11-17-15	
<input checked="" type="checkbox"/> 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)	
<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE	
<input type="checkbox"/> 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE	
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE	

TEST 1 - .099	TEST 2 - .099	TEST 3 .099
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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 0	(0-.04) 0	(.05-.09) 0	(.10-.14) 0	(.15-.09) 0	(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).

<b>INSPECTING OFFICER</b>	
SIGNATURE 	PRINT FULL NAME Sgt. Wayne Byrom
TYPE II PERMIT NUMBER/EXPIRATION DATE 240241 / 05-19-16	TELEPHONE NUMBER 816-271-5359

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:

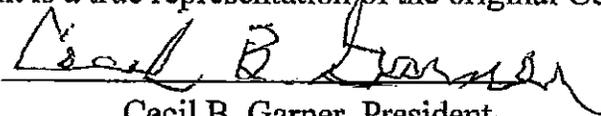
RepCo Marketing, Inc. manufactured, tested and supplied Lot Number 14001 of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .1216 gms/dl +/-0.003 gms/dl wt/vol ethanol (95% Confidence).

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.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
ST. JOSEPH POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201302  
04/07/15

REST TIME: 00:00  
SUBJECT NAME:  
RFI  
DOB: 01/01/01 SEX: M  
DATE/D.L.: XX/11111  
RESTING OFFICER:  
BYRON/W/G  
OFFICER I.D.: 7054  
TESTING OFFICER:  
BYRON/W/G  
OFFICER I.D.: 7054  
SERIAL NUMBER: 240241  
EXPIRATION DATE: 05/19/16  
ISCELLANEOUS DATA:  
RFI TEST

--- BREATH ANALYSIS ---

ALCOHOL TEST .000 19:30  
INTERNAL STANDARD VERIFIED 19:30  
RADIO INTERFERENCE

DR SIGNATURE



Card No.

REORDER ALL SUPPLIES FROM N.P.A.S.  
P.O. BOX 1435, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
ST. JOSEPH POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201302  
04/07/15  
19:25

--- 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:;<=>?@ABCDEFGH  
IJKLMNOPQRSTUVWXYZ[\]^\_`abcde fghijk lmnop  
qrs tuvwxyz{|}~

OPERATOR SIGNATURE



Card Stock No.  
60021

REORDER ALL SUPPLIES FROM N.P.A.S.  
P.O. BOX 1435, MANSFIELD, OH 44901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

**BAC DataMaster**  
Evidence Ticket

STATE OF MISSOURI  
ST. JOSEPH POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 201302  
04/07/15

TESTING OFFICER:  
BYRDM/W/G  
OFFICER I.D.: 7054  
PERMIT NUMBER: 240241  
EXPIRATION DATE: 05/19/16  
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	19:47
INTERNAL STANDARD	VERIFIED	19:47
EXTERNAL STANDARD	.099	19:48
BLANK TEST	.000	19:48
EXTERNAL STANDARD	.099	19:49
BLANK TEST	.000	19:49
EXTERNAL STANDARD	.099	19:50
BLANK TEST	.000	19:50

N = 3  
SIM. = .1  
AVG. = .099

OPERATOR SIGNATURE 

Card Stock No.  
60021

REORDER ALL SUPPLIES FROM N.P.A.S.  
P.O. BOX 1455, MANSFIELD, OH 44901



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

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**PERMIT  
 TYPE II**

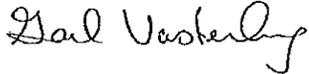
**WAYNE BRYOM**

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

**ALCO-SENSOR IV WITH PRINTER, 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 308.111 through 308.119 RSMo.

DATE 5/19/2014  
 NUMBER 240241  
 EXPIRES 5/19/2016

  
 DIRECTOR OF STATE PUBLIC HEALTH LABORATORY  
  
 DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

MO 580-0771 (6-10)

LAB-1 (R5-10)

 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 BRYOM, WAYNE  
 Permit No 240241  
 Date Issued 5/19/2014 Date Expires 5/19/2016