



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 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 201288	NAME OF AGENCY Campbell Police Dept.	DATE OF INSPECTION 03/02/2016
LOCATION OF INSTRUMENT (STREET AND CITY) 204 W. Grand Campbell, MO 63933		TIME OF INSPECTION 9:38 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) 03/02/16 0:901
<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	LOT # 15001 EXP. DATE 05/20/2017
<input checked="" type="checkbox"/> SIMULATOR TEMP (34°C ± 0.2°C) 34 °C	SIMULATOR SN SD174301 EXP. DATE 01/13/2017

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 • .095%	TEST 2 • .095%	TEST 3 • .095%
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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-.19)	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).

Instrument is within D.O.H. specifications. Simulator solution RepCo lot# 15001 exp. date 05/20/2017. Vapor alcohol value .100+/- 3%

INSPECTING OFFICER	
SIGNATURE <i>Weldon Wallace</i>	PRINT FULL NAME Weldon Wallace
TYPE II PERMIT NUMBER/EXPIRATION DATE 240323 08/12/2016	TELEPHONE NUMBER (573) 246-2511

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

2

PERMIT
TYPE II
WELDON WALLACE

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 8/12/2014

NUMBER 240323

EXPIRES 8/12/2016

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 WALLACE, WELDON
Permit No 240323
Date Issued 8/12/2014 Date Expires 8/12/2016

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
CAMPBELL POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 201289
03/02/16

TESTING OFFICER:

WALLACE/WELDON/L

OFFICER I.D.: 23

PERMIT NUMBER: 240323

EXPIRATION DATE: 08-12-16

MISCELLANEOUS DATA:

MAINTENANCE CHECK

--- SUPERVISOR NOTE ---

BLANK TEST	.000	09:05
INTERNAL STANDARD	VERIFIED	09:05
EXTERNAL STANDARD	.095	09:05
BLANK TEST	.000	09:06
EXTERNAL STANDARD	.095	09:06
BLANK TEST	.000	09:07
EXTERNAL STANDARD	.095	09:07
BLANK TEST	.000	09:08

n = 3

SIM. = .1

AVG. = .095

OPERATOR SIGNATURE

Card Stock No.
21

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
CAMPBELL POLICE DEPARTMENT

BAC DATA MASTER SERIAL NUMBER 201289
03/02/16
09:07

--- 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

!@#\$%^&*()~.,-/'012345678910/=>?@00000000
HIJKLMNOPQRSTUVWXYZ[]_`abcde fghijklmnop
pqrs 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
CAMPBELL POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 291209
03-02-16

HIGHEST TIME: 00:00
SUBJECT NAME:
JOE/JON/A
DOB: 10/10/70 SEX: M
STATE/D.L.# MO/123456
ARRESTING OFFICER:
WALLACE/WELDON/L
OFFICER I.D.# 20
TESTING OFFICER:
WALLACE/WELDON/L
OFFICER I.D.# 23
PERMIT NUMBER: 240303
EXPIRATION DATE: 08/12/15
MISCELLANEOUS DATA:
MAINTENANCE CHECK

--- BREATH ANALYSIS ---

BLANK TEST	.000	03-12
(INTERNAL STANDARD)	VERIFIED	03-12
RADIO INTERFERENCE		

OPERATOR SIGNATURE 

Card Stock No.
60021

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