MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
# DATAMASTER MAINTENANCE REPORT

RECEIVED DHSS Breath Alcohol Program By Carol Day at 9:12 am, Apr 21, 2010

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN: 203049

DATE OF INSPECTION: 4-15-10

LOCATION OF INSTRUMENT (STREET AND CITY): 111 South Oak, Eldon mo. 65026

TIME OF INSPECTION: 13:54

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

- [x] DIAGNOSTIC CHECK (PRINTOUT ATTACHED)
  - [x] COMPUTER ok
  - [x] DETECTOR ok
  - [x] PROGRAM ok
  - [x] FILTERS ok
  - [x] HEATERS SAMPLE CHA )ER 49 °C
  - [x] QUARTZ STANDARD ok
  - [x] FLOW DETECTOR ok
  - [x] CALIBRATION ok
  - [x] PUMP HIGH SPEED ok
  - [x] PRINTER ok
- [x] INDICATOR LIGHTS ok
- [x] TIME AND DATE ok
- [x] SIMULATOR TEMPERATURE (34 °C ± 0.2°C) 34.0
- [x] CALIBRATION CHECK -

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. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)

- [x] 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
- [ ] 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

| TEST 1 | TEST 2 | TEST 3 |
|---|---|---|
| .097 | .099 | .099 |

- [x] PERFORM R.F.I. TEST (PRINTOUT ATTACHED)
- [x] NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)

| REFUSALS | (0-.04) | (.05-.09) | (.10-.14) | (.15-.19) | (Over .19) |
|---|---|---|---|---|---|
| 00 | 00 | 00 | 00 | 01 | 00 |

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)

Solution; Repco, Lot #D; 09002, Exp. Date; 08-31-11, Conj. 100
Instrument Functions Within Specs.
Replace Fan battery @ Mo. Safety Center

INSPECTING OFFICER

SIGNATURE: Ronald Chapman

PRINT NAME: Ronald D. Chapman

TYPE II PERMIT NUMBER/EXPIRATION DATE: 100044 03-02-11

TELEPHONE NUMBER: 573-392-5611

) 580-1455 (8-94)

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER
services provided on a nondiscriminatory basis

Lab.-118

*REPCO MARKETING INC.*

9101-189 STONYBROOK DRIVE
RALEIGH, N.C. 27904
919-876-9460

# CERTIFICATE OF ANALYSIS

Random samples of lot number 08102 of Alcohol Certified Solution for simulator were analyzed by an independent laboratory utilizing a gas chromatograph and found to contain .0483gms/dl wt. /vol. ethyl alcohol.

The alcohol and distilled water used in the solution were found to be free of any interfering substance.

When used in a calibrated simulator, operating at 34 c +/-.2 c, this solution will give an alcohol breath test instrument reading of .040 percent BAC +/- 2% or .002 BAC ( whichever is greater).

The expiration date for this lot number is July 31, 2010 at 11:59PM.

This document is a true representation of the original Certificate of Analysis.

Cecil B. Garner, President
RepCo Marketing, Inc.

Form RC-01

State of Missouri
DEPARTMENT OF HEALTH

# PERMIT
# TYPE II

**RONALD D CHAPMAN**

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

**DATAMASTER**

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

John J Mathewson

Director of State Public Health Laboratory

Margaret T. Donnelly

Director, Department of Health

Date 03/02/09

Number 920044

Expires 03/02/2011

MO 580-0771 (7-88)

Lab. 4 (R7-88)

**Face This Side Down – This Edge In First**

# BAC DataMaster
## Evidence Ticket

STATE OF MISSOURI
ELDON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 203049
04/15/10
13:54

---- 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:;<=>?@ABCDEFG
HIJKLMNOPQRSTUVWXYZ[\]^ `abcdefghijklmno
pqrstuvwxyz{|}~

Operator Signature Ronald Chapman

**Face This Side Down – This Edge In First**

# BAC DataMaster
## Evidence Ticket

STATE OF MISSOURI
ELDON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 203049
04/15/10

ARREST TIME: 13:45
SUBJECT NAME:
N/A
DOB: 01/01/01 SEX: M
STATE/D.L.: MO/0
ARRESTING OFFICER:
N/A
OFFICER I.D.: 0
TESTING OFFICER:
CHAPMAN/RONALD/D
OFFICER I.D.: 803
PERMIT NUMBER: 920044
EXPIRATION DATE: 03/02/11
MISCELLANEOUS DATA:
RFI TST

---- BREATH ANALYSIS ----

| | | |
|---|---|---|
| BLANK TEST | .000 | 14:06 |
| INTERNAL STANDARD | VERIFIED | 14:06 |
| RADIO INTERFERENCE | | |

Operator Signature _____

2208-02

**Face This Side Down – This Edge In First**

# BAC DataMaster
## Evidence Ticket

STATE OF MISSOURI
ELDON POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 209049
04/15/18

TESTING OFFICER:
CHAPMAN/RONALD/D
OFFICER I.D.: 003
PERMIT NUMBER: 920044
EXPIRATION DATE: 03/08/19
MISCELLANEOUS DATA:
MAINTENANCE

--- SUPERVISOR MODE ---

| | | |
|---|---|---|
| BLANK TEST | .000 | 14:00 |
| INTERNAL STANDARD | VERIFIED | 14:00 |
| EXTERNAL STANDARD | .097 | 14:00 |
| BLANK TEST | .000 | 14:01 |
| EXTERNAL STANDARD | .099 | 14:01 |
| BLANK TEST | .000 | 14:02 |
| EXTERNAL STANDARD | .099 | 14:02 |
| BLANK TEST | .000 | 14:03 |

N = 3
STA. = .1
AVG. = .0983

Operator Signature_____

2208-02