BREATH ALCOHOL PROGRAM

JUN - 4 2009

DHSS STATE HEALTH LA

MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY

DATAMASTER MAINTENANCE REPORT

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: 261214

DATE OF INSPECTION: 6.4.09

LOCATION OF INSTRUMENT (STREET AND CITY): Hayti Police Dept. 300 EAST MAIN Hayti

TIME OF INSPECTION: 231 pm

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
  - [x] DETECTOR
  - [x] PROGRAM
  - [x] FILTERS
  - [x] HEATERS SAMPLE CHAMBER 50 °C (ok)
  - [x] QUARTZ STANDARD
  - [x] FLOW DETECTOR
  - [x] CALIBRATION
  - [x] PUMP HIGH SPEED
  - [x] PRINTER
- [x] INDICATOR LIGHTS
- [x] TIME AND DATE (ok)
- [x] SIMULATOR TEMPERATURE (34 °C ± 0.2°C) (33.99) (ok)
- [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 (ok)
  - [ ] ~~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
.099	.100	.100

- [x] PERFORM R F I TEST (PRINTOUT ATTACHED) (ok)
- [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)
Ø	2	1	1	Ø	Ø

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)

Instruments Fits
All guide Lines of
Dept. of Health

Repco
Lot # 08002
Expires 10-13-2010
Solution .100

INSPECTING OFFICER

SIGNATURE	PRINT NAME
▶ [signature]	DAVID MACLIN
TYPE II PERMIT NUMBER/EXPIRATION DATE	**TELEPHONE NUMBER**
820161 05-12-2010	573-359-1259

2-4-09

REPCO MARKETING INC.

3101-188 STONYBROOK DRIVE
RALEIGH, N.C. 27604
919-876-5480

CERTIFICATE OF ANALYSIS

MANUFACTURER AND SUPPLIER: RepCo Marketing, Inc.
LOT NUMBER: 08002
EXPIRATION DATE: October 13, 2010 at 11:59 p.m.

RepCo Marketing, Inc. certifies the following:

RepCo Marketing, Inc. manufactured, tested and supplied Lot Number **08002** of Alcohol Certified Solution for simulators. Random samples of said lot number were analyzed utilizing a gas chromatograph and found to contain **0.1209** gms/dl wt/vol ethyl alcohol in aqueous solution (i.e. ethanol).

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 **0.100%** +/-3% when heated to 34 Degrees Celsius +/-0.2 Degrees Celsius in a simulator.

The date of manufacture for this lot number is **October 14, 2008.** The expiration date for this lot number is **October 13, 2010** at 11:59 p.m.

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

Cecil B. Garner, President
RepCo Marking, Inc.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
HAYTI POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 281214
06/04/09

TESTING OFFICER:
MACLIN/DAVID
OFFICER I.D.: 506
PERMIT NUMBER: 82016
EXPIRATION DATE: 05/12/10
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	14:40
INTERNAL STANDARD	VERIFIED	14:40
EXTERNAL STANDARD	.079	14:41
BLANK TEST	.000	14:41
EXTERNAL STANDARD	.100	14:42
BLANK TEST	.000	14:44
EXTERNAL STANDARD	.100	14:47
BLANK TEST	.000	14:49

[illegible]
[illegible] = .1
A/B = [illegible]

OPERATOR SIGNATURE

CARD STK # 60036

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
HAYTI POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 601219
06 04/09
14:31

---- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM:	OKAY
MERTEK SAMPLE CHAMBER:	OKAY
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

CARD STK # 60036

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
HAYTI POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 291214
08/04/09

ARREST TIME: 14:20
SUBJECT NAME:
TEST
DOB: 11/11/11 SEX: M
STATE/D.L.: MO/111111111
ARRESTING OFFICER:
MACLIN/DAVID
OFFICER I.D.: 506
TESTING OFFICER:
MACLIN/DAVID
OFFICER I.D.: 506
PERMIT NUMBER: 820161
EXPIRATION DATE: 05/12/10
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	14:48
INTERNAL STANDARD	VERIFIED	14:48
RADIO INTERFERENCE		

OPERATOR SIGNATURE

CARD STK # 60036

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

State of Missouri
DEPARTMENT OF HEALTH

PERMIT
TYPE II

DAVID MACLIN

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.

Date 05/12/08

Number 820161

Expires 05/12/2010

Director of State Public Health Laboratory

Director, Department of Health