MISSOURI DEPARTMENT OF HEALTH
STATE PUBLIC HEALTH LABORATORY
DATAMASTER MAINTENANCE REPORT

COP

RECEIVED DHSS Breath Alcohol Program By Carol Day at 10:36 am, Sep 08, 2009

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	DATE OF INSPECTION
201249- Sedalia Police Department	08-29-2009
LOCATION OF INSTRUMENT (STREET AND CITY)	TIME OF INSPECTION
201 W. Second Str., Sedalia, MO 65301	1212 hours

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 49 °C
  - [x] QUARTZ STANDARD
  - [x] FLOW DETECTOR
  - [x] CALIBRATION
  - [x] PUMP HIGH SPEED
  - [ ] PRINTER
- [x] INDICATOR LIGHTS
- [x] TIME AND DATE
- [x] SIMULATOR TEMPERATURE (34 °C ± 0.2°C) 34.0°C
- [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
.096	.096	.096

- [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)
0	0	0	1	2	0

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)

This instrument conforms to the Department of Health standards.

Supplier: RepCo Concentration: .100% Exp. Date: 10-13-2010
Lot #: 08002

INSPECTING OFFICER

SIGNATURE	PRINT NAME
Victoria A. Kottman	Victoria A. Kottman
TYPE II PERMIT NUMBER/EXPIRATION DATE	TELEPHONE NUMBER
720249 Exp. Date: 12-18-2009	660/826-8100

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

REPCO MARKETING INC.

3101-168 STONYBROOK DRIVE
RALEIGH, N.C. 27604
919-878-5460

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.

Form MO 01

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
SEDALIA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201249
08/29/09
12:12

--- 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 Victoria A. Kottman #170

2208-02

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
SEDALIA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201249
08/29/09

TESTING OFFICER:
KOTTMAN/V/A
OFFICER I.D.: 170
PERMIT NUMBER: 720249
EXPIRATION DATE: 12/18/09
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	12:15
INTERNAL STANDARD	VERIFIED	12:15
EXTERNAL STANDARD	.096	12:16
BLANK TEST	.000	12:16
EXTERNAL STANDARD	.096	12:17
BLANK TEST	.000	12:17
EXTERNAL STANDARD	.096	12:18
BLANK TEST	.000	12:19

N = 3
SIM. = .1
AVG. = .096

Operator Signature Victoria A. Kottman #170

2208-02

Face This Side Down – This Edge In First

BAC DataMaster
Evidence Ticket

STATE OF MISSOURI
SEDALIA POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201249
08/29/09

ARREST TIME: 11:55
SUBJECT NAME:
TEST/A
DOB: 12/12/33 SEX: M
STATE/D.L.: MO/3
ARRESTING OFFICER:
KOTTMAN/V/
OFFICER I.D.: 170
TESTING OFFICER:
KOTTMAN/V
OFFICER I.D.: 170
PERMIT NUMBER: 720249
EXPIRATION DATE: 12/18/09
MISCELLANEOUS DATA:

--- BREATH ANALYSIS ---

BLANK TEST	.000	12:22
INTERNAL STANDARD	VERIFIED	12:22
RADIO INTERFERENCE		

Operator Signature Victoria A. Kottman #170

2208-02

State of Missouri
DEPARTMENT OF HEALTH

PERMIT
TYPE II

VICTORIA KOTTMAN

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 12/18/07

Number 720249

Expires 12/18/2009

Director of State Public Health Laboratory

Director, Department of Health

MO 580-0771 (7-88)

Lab. 4 (R7-88)