



Missouri Department of Health and Senior Services
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 RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466
 Gail Vasterling
 Director



Jeremiah W. (Jay) Nixon
 Governor

Missouri Department of Health and Senior Services Breath Alcohol Program

SIMULATOR CALIBRATION REPORT

This is to certify that the simulator listed below has been examined and tested using standards traceable to the National Institute of Standards and Technology (NIST) in accordance to the standards set by the Rules of Missouri Department of Health and Senior Services, 19 CSR 25-30.

SIMULATOR INFORMATION

Agency: Edmundson Police Department
 Serial Number: SD2737
 Manufacturer: Guth
 Model Number: 10-4D

CALIBRATION RESULTS

| <u>Reference Temperature</u> | <u>Simulator Temperature</u> |
|------------------------------|------------------------------|
| 33.98 | 34.0 |

This calibration was performed with
 NIST-Traceable Thermometer SN: 094948

This simulator was tested by: RWW

This testing was performed: 08/20/2015

This certification expires: 08/20/2016

Signature of certifying DHSS Scientist: 

Name of certifying DHSS Scientist: Brian M. Lutmer

MISSOURI SAFETY CENTER SIMULATOR CHECK WORKSHEET



| | | | |
|---------------------------------|---|-----------------------------|--|
| Date: 08/20/15 | Time: 1355 | Date Last Checked: 07/15/14 | Agency: EDMUNDSON PD |
| Simulator Model: | [] 2100 <input checked="" type="checkbox"/> 10-4D [] 12V500 | Simulator Serial #: | SD2737 |
| Thermometer serial #: | 094948 | Email address: | DPAT420@yahoo.com |
| Thermometer certification date: | 02/13/15 | Agency property #: | <input checked="" type="checkbox"/> none |
| Thermometer expiration date: | 02/13/16 | Thermometer reading | Simulator reading |
| 1 st check time: | 1355 | 33.99 | 34.0 |
| 2 nd check time: | 1358 | 33.99 | 34.0 |
| 3 rd check time: | 1401 | 33.98 | 34.0 |
| 4 th check time: | 1404 | 33.98 | 34.0 |
| 5 th check time: | 1407 | 33.99 | 34.0 |
| Average readings: | | 33.98 | 34.0 |
| Bias calculation: | | -0.02 | TECHNICIAN INITIALS: RWW |

This form meets or exceeds the requirements of the Missouri Department of Health breath alcohol program.

Check "o" rings on quick-disconnects and replace as needed.

Check simulator "o" ring and replace as needed.

Check jar for breaks/cracks and replace as needed.

COMMENTS:



This simulator is operating within DHSS breath alcohol specifications (19CSR 21-30.051).

SIMULATOR SERIAL NO.: **SD2737**
 EXPIRATION DATE: **08/20/2016**
 DATE OF CALIBRATION CHECK: **08/20/2015**
 NIST REF. THEM. SERIAL NO.: **094948**
 AVERAGE SIM. TEMP: **33.98 C**
 ANALYST INITIALS: **RWW**

DAN PATRICK IS TYPE 2