





**Missouri Department of Health and Senior Services**

P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010  
RELAY MISSOURI for Hearing and Speech Impaired 1-800-735-2966 VOICE 1-800-735-2466

**Randall W. Williams, MD, FACOG**  
Director



**Michael L. Parson**  
Governor

# SIMULATOR CERTIFICATION REPORT

## SIMULATOR INFORMATION

**Simulator Serial Number:** MP4953      **Manufacturer:** Guth  
**Model Number:** 12V500  
**Agency:** MARSHALL PD  
**Agency Address:** 461 W ARROW, MARSHALL, MO 65340

## NIST THERMOMETER INFORMATION

**Serial Number:** 17KMM00689      **Bias:** 0.00  
**Uncertainty:** 0.02  
**Date of Certification:** 12/11/2018      **Date of Expiration:** 12/11/2019

## ENVIRONMENTAL CONDITIONS

The environmental conditions during testing are within the tolerances of DHSS BAP method 3.

## VERIFICATION RESULTS

<u>Simulator Average</u>	<u>NIST Average</u>	<u>Combined Uncertainty</u>
33.98	34.01	.06

The combined uncertainty is calculated with a k=2 value.

## ADJUSTMENT RESULTS

No adjustment was needed.

**Date of testing:** 10/7/2019  
**Certification Expiration:** 10/7/2020  
**Simulator testing technician:** D. DEBOARD

**Notes on Condition:** none

**Deviation(s) from method:** none

**DHSS BAP Scientist Approving:** B. LUTMER  
**Certification No:** MP4953\_1072019

X *Brian Lutmer*

DHSS BAP Scientist Approving



STATE OF MISSOURI  
 DEPARTMENT OF HEALTH AND SENIOR SERVICES  
 BREATH ALCOHOL PROGRAM

2

**PERMIT**  
**TYPE II**  
**JOSEPH E VALIQUETTE**

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

**ALCO-SENSOR IV WITH PRINTER, INTOX DMT**

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 12/18/2019

NUMBER 290294

EXPIRES 12/18/2021

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** VALIQUETTE, JOSEPH  
**Permit No** 290294  
**Date Issued** 12/18/2019    **Date Expires** 12/18/2021



## GUTH LABORATORIES, INC.

590 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **18190** of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on **June 14, 2018**, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain **0.1215%** (w/vol) ethyl alcohol. The expiration date for this lot number is **June 12, 2020** at 11:59 PM.

When used in a calibrated Simulator, operating at  $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol analysis instrument reading of **0.100 g/210L  $\pm$  3%**.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President  
GUTH LABORATORIES, INC.

***NIST Traceability:***

*Testing was conducted using Cerilliant Reference Standard lot number FN04271602 whose values are traceable to NIST.*

*All balances are calibrated annually by an outside agency using NIST traceable weights. Calibration verification is done prior to each use utilizing NIST traceable weights.*

AS IV Serial no: 187460  
Version no: 502B

TEST REFNO: 80701  
Temp Date Time 2100

VOID: N/A  
12 01/06/20 12:01

Subject Name  
J. Usliquette 140  
Subject I.D.  
J. Usliquette 290294  
Operator Name: I.D.  
Marshall PD  
Location  
461 W. Arrow

AS IV Serial no: 187460  
Version no: 502B

TEST REFNO: 80700  
Temp Date Time 2100

Air Blank:  
01/06/20 12:00 .000  
Calibration Check:  
26 01/06/20 12:00 .100

Subject Name  
J. Usliquette 140  
Subject I.D.  
J. Usliquette 290294  
Operator Name: I.D.  
Marshall PD  
Location  
461 W. Arrow

AS IV Serial no: 107460  
Version no: 532B

TEST RECORD 00699

Temp Date Time <sup>g/</sup> 210L

Air Blank:  
01/06/20 11:58 .000  
Calibration Check:  
26 01/06/20 11:58 .100

Subject Name

J. V. Liquette 140

Subject I.D.

J. V. Liquette 290294

Operator Name, I.D.

Marshall PD

Location

461 W. Arrow

AS IV Serial no: 107460  
Version no: 532B

TEST RECORD 00698

Temp Date Time <sup>g/</sup> 210L

Air Blank:  
01/06/20 11:57 .000  
Calibration Check:  
25 01/06/20 11:57 .101

Subject Name

J. V. Liquette 140

Subject I.D.

J. V. Liquette 290294

Operator Name, I.D.

Marshall PD

Location

461 W. Arrow