

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



Michael L. Parson

Robert J. Knodell Acting Director

SIMULATOR CERTIFICATION REPORT

SIMULATOR INFORMATION

Simulator Serial Number: SD2753 Manufacturer: Guth

Model Number: 10-4D

Agency: KIMBERLING CITY PD

Agency Address: PO BOX 370, KIMBERLING CITY, MO 65686

NIST THERMOMETER INFORMATION

Serial Number: 17KMM00690 Bias: 0.00

Uncertainty: 0.02

Date of Certification: 11/6/2020 **Date of Expiration:** 11/6/2021

ENVIRONMENTAL CONDITIONS

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

VERIFICATION RESULTS

Simulator Average NIST Average Combined Uncertainty

34.00 33.97 .06

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

ADJUSTMENT RESULTS

No adjustment was needed.

Date of testing:6/29/2021Certification Expiration:6/29/2022Simulator testing technician:M. BOND

Notes on Condition: none

Deviation(s) from method: none

DHSS BAP Scientist Approving: B. LUTMER

Certification No: SD2753 6292021

DHSS BAP Scientist Approving