## VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument State of Alaska

Serial #: 100348 Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program Date: 02/21/2020

## External Standard Test Values

EXTERNAL STANDARD INFORMATION

NOMINAL: 0.080

TARGET AT 28.64: 0.077 LOT #: AG923401

EXPIRATION: 08/22/2021 TANK PRESSURE: 1119 psi

BLANK TEST	0.000	12:02
INTERNAL STANDARD	VERIFIED	12:02
EXTERNAL STANDARD	0.075	12:02
BLANK TEST	0.000	12:03
EXTERNAL STANDARD	0.075	12:03
BLANK TEST	0.000	12:04
EXTERNAL STANDARD	0.075	12:04
BLANK TEST	0.000	12:05
EXTERNAL STANDARD	0.075	12:05
BLANK TEST	0.000	12:06
EXTERNAL STANDARD	0.075	12:06
BLANK TEST	0.000	12:07

Average = 0.0750Std Dev = 0.0000

## Diagnostic Check

VERSIONS DMT: 3.02 PIC: 3.02 Modem: 2.6 Ouestions: 2.2

TEMPERATURES Sample Chamber = 48.9°C PASSED PASSED Breath Tube  $= 46.3^{\circ}C$ PUMP INFO Flow Rate = 4.394 L/M PASSED DETECTOR INFO PASSED PUMP ON PUMP OFF PASSED FILTER INFO PASSED Filter 1

Filter 2 PASSED PASSED Filter 3 INTERNAL STANDARD PASSED

I, Brandi M. Barnett, after being first duly sworn, depose and state as follows:

(1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.

(2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.

(3) I am the Scientific Director of the State Breath Alcohol Program.

(4) In that capacity, I am responsible for overseeing the Breath Alcohol Program, which includes assuring that instruments are calibrated and maintaining program records.

(5) The above is a true and accurate verification of calibration, which is performed by the instrument's software, as specified by the State Breath Alcohol Program. Verification of calibration is a regularly conducted and regularly recorded activity of the State Breath Alcohol Program.

(6) The referenced instrument is certified for evidentiary use in the State of Alaska.

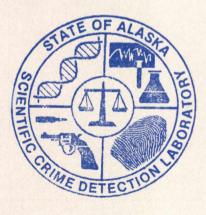
4/7/20

Brandi M. Barnett

Scientific Director State Breath Alcohol Program

Subscribed and sworn before me this \( \frac{1}{2} \) day of \( \frac{4}{2} \), 20 \( \frac{20}{2} \)

Notary Public My Commission Expires With Office



M 03/02/20