## **VERIFICATION OF CALIBRATION REPORT**

of DataMaster dmt Breath Test Instrument State of Alaska

Serial #: 100666

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:07/18/2020

## External Standard Test Values

EXTERNAL STANDARD INFORMATION

NOMINAL: 0.080

TARGET AT 29.88: 0.080 LOT #: AG826101 EXPIRATION: 09/18/2020 TANK PRESSURE: 562 psi

BLANK TEST 0.000 12:02 INTERNAL STANDARD VERIFIED 12:02 EXTERNAL STANDARD 0.077 12:02 0.000 12:03 BLANK TEST EXTERNAL STANDARD 0.077 12:03 BLANK TEST 0.000 12:04 0.077 EXTERNAL STANDARD 12:04 BLANK TEST 0.000 12:05 EXTERNAL STANDARD 0.077 12:05 12:06 BLANK TEST 0.000 EXTERNAL STANDARD 0.077 12:06 12:07 BLANK TEST 0.000

Average = 0.0770Std Dev = 0.0000

## Diagnostic Check

VERSIONS DMT: 3.02 PIC: 3.03 Modem: 2.6 Questions: 2.2

TEMPERATURES

Sample Chamber = 48.8°C PASSED Breath Tube = 45.5°C PASSED

PUMP INFO

Flow Rate = 4.096 L/M PASSED

DETECTOR INFO

PUMP ON PASSED PUMP OFF PASSED

FILTER INFO Filter 1 Filter 2

Filter 3

PASSED PASSED PASSED

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.

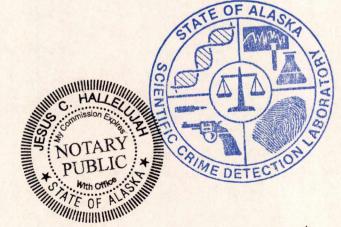
(6) The referenced instrument is certified for evidentiary use in the State of Alaska.

Brandi M. Barnett Scientific Director

State Breath Alcohol Program

Subscribed and sworn before me this O/ dat of L

Notary Public My Commission Expires With Office



COB 8/12/20