

VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument

State of Alaska

Serial #: 100348

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date: 05/23/2019

External Standard Test Values

EXTERNAL STANDARD INFORMATION

NOMINAL: 0.080
TARGET AT 29.33: 0.078
LOT #: AG735001
EXPIRATION: 12/16/2019
TANK PRESSURE: 951 psi

BLANK TEST	0.000	14:10
INTERNAL STANDARD	VERIFIED	14:10
EXTERNAL STANDARD	0.075	14:10
BLANK TEST	0.000	14:11
EXTERNAL STANDARD	0.075	14:11
BLANK TEST	0.000	14:12
EXTERNAL STANDARD	0.075	14:12
BLANK TEST	0.000	14:13
EXTERNAL STANDARD	0.075	14:14
BLANK TEST	0.000	14:14
EXTERNAL STANDARD	0.075	14:15
BLANK TEST	0.000	14:16

Average = 0.0750
Std Dev = 0.0000

Diagnostic Check

VERSIONS

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

TEMPERATURES

Sample Chamber = 49.1°C PASSED
Breath Tube = 47.9°C PASSED

PUMP INFO

Flow Rate = 4.596 L/M PASSED

DETECTOR INFO

PUMP ON PASSED
PUMP OFF PASSED

FILTER INFO

Filter 1 PASSED
Filter 2 PASSED
Filter 3 PASSED

INTERNAL STANDARD

PASSED

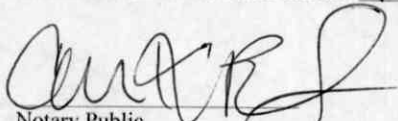
I, Charles R. Foster, after being first duly sworn, depose and state as follows:

- (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.

 7/19/19

Charles R. Foster
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 19 day of 07, 20 19


Notary Public
My Commission Expires With Office



0013 7/15/19