

VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument

State of Alaska

Serial #: 100362

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date: 01/03/2018

External Standard Test Values

EXTERNAL STANDARD INFORMATION

NOMINAL: 0.080
TARGET AT 29.30: 0.078
LOT #: AG608504
EXPIRATION: 03/25/2018
TANK PRESSURE: 754 psi

BLANK TEST	0.000	12:02
INTERNAL STANDARD	VERIFIED	12:02
EXTERNAL STANDARD	0.078	12:02
BLANK TEST	0.000	12:03
EXTERNAL STANDARD	0.079	12:03
BLANK TEST	0.000	12:04
EXTERNAL STANDARD	0.078	12:04
BLANK TEST	0.000	12:05
EXTERNAL STANDARD	0.078	12:05
BLANK TEST	0.000	12:06
EXTERNAL STANDARD	0.078	12:06
BLANK TEST	0.000	12:07

Average = 0.0782
Std Dev = 0.0004

Diagnostic Check

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

TEMPERATURES

Sample Chamber = 48.8°C PASSED
Breath Tube = 48.0°C PASSED

PUMP INFO

Flow Rate = 5.027 L/M PASSED

DETECTOR INFO

PUMP ON PASSED
PUMP OFF PASSED

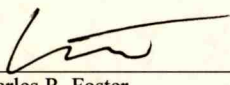
FILTER INFO

Filter 1 PASSED
Filter 2 PASSED
Filter 3 PASSED

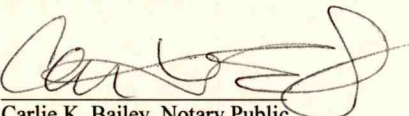
INTERNAL STANDARD PASSED

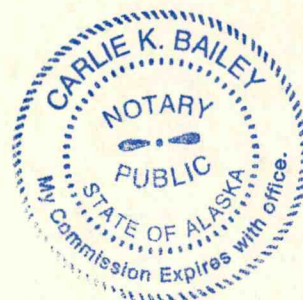
I, Charles R. Foster, after being first duly sworn, depose and state as follows:

- (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.

 1/31/18
Charles R. Foster
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 31 day of 01, 20 18


Carlie K. Bailey, Notary Public
My Commission Expires With Office



003/18/18