

VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument

State of Alaska

Serial #: 100364

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date: 02/21/2025

External Standard Test Values

EXTERNAL STANDARD INFORMATION

NOMINAL: 0.080
TARGET AT 29.35: 0.078
LOT #: AG310901
EXPIRATION: 04/19/2025
TANK PRESSURE: 749 psi

BLANK TEST	0.000	12:02
INTERNAL STANDARD	VERIFIED	12:02
EXTERNAL STANDARD	0.077	12:02
BLANK TEST	0.000	12:03
EXTERNAL STANDARD	0.077	12:03
BLANK TEST	0.000	12:04
EXTERNAL STANDARD	0.078	12:04
BLANK TEST	0.000	12:05
EXTERNAL STANDARD	0.077	12:05
BLANK TEST	0.000	12:06
EXTERNAL STANDARD	0.078	12:07
BLANK TEST	0.000	12:07

Average = 0.0774
Std Dev = 0.0005

Diagnostic Check

VERSIONS

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

TEMPERATURES

Sample Chamber = 48.7°C	PASSED
Breath Tube = 48.1°C	PASSED

PUMP INFO

Flow Rate = 5.036 L/M	PASSED
-----------------------	--------

DETECTOR INFO

PUMP ON	PASSED
PUMP OFF	PASSED


FILTER INFO

Filter 1	PASSED
Filter 2	PASSED
Filter 3	PASSED

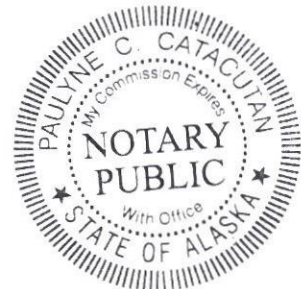
INTERNAL STANDARD	PASSED
-------------------	--------

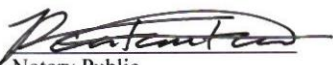
I, Charles R. Foster, after being first duly sworn, depose and state as follows:

- (1) I am a current employee of 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) As of the date signed below, I certify that the calibration of the referenced instrument was accurate on the date in which the above tests were performed and therefore certified for evidentiary use in the State of Alaska.


Charles R. Foster
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 28 day of 03, 20 25




Notary Public
My Commission Expires With Office

Tech Reviewer Initials: CMW

Date: 3/6/25