## VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument State of Alaska

Serial #: 100375

## Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:04/11/2021

External Standard Test Values				Diagnostic Check	
EXTERNAL STANDARD INFORM NOMINAL: 0.080 TARGET AT 27.75: 0.074 LOT #: AG018102 EXPIRATION: 06/29/2022	MATION		VERSIONS DMT: 3.02 PIC: 3.02 Modem: 2.6		
TANK PRESSURE: 603 psi			Questions: 2.2		
BLANK TEST INTERNAL STANDARD	VERIFIED		TEMPERATURES		
EXTERNAL STANDARD		12:02	Sample Chamber =		PASSED
BLANK TEST EXTERNAL STANDARD BLANK TEST	0.000 0.074 0.000	12:03	Breath Tube = PUMP INFO	48.1°C	PASSED
EXTERNAL STANDARD BLANK TEST	0.074	12:04	Flow Rate = 4.47	7 L/M	PASSED
EXTERNAL STANDARD BLANK TEST	0.074 0.000	12:06	DETECTOR INFO PUMP ON		PASSED
EXTERNAL STANDARD BLANK TEST	0.074 0.000		PUMP OFF		PASSED
Average = $0.0740$			FILTER INFO Filter 1		PASSED
Std Dev = $0.0000$			Filter 2		PASSED
			Filter 3		PASSED
			INTERNAL STANDAR	D	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.

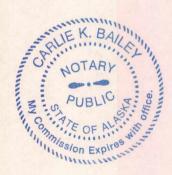
5/21/21 and

Brandi M. Barnett Scientific Director State Breath Alcohol Program

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

Notary Public

My Commission Expires With Office





IN 04/14/21