## VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument State of Alaska

Serial #: 100692 Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program Date: 02/20/2018

## External Standard Test Values

EXTERNAL STANDARD INFORMATION

NOMINAL: 0.080

TARGET AT 30.46: 0.081 LOT #: AG735001 EXPIRATION: 12/16/2019 TANK PRESSURE: 1215 psi

BLANK TEST	0.000	11:45
INTERNAL STANDARD	VERIFIED	11:45
EXTERNAL STANDARD	0.083	11:45
BLANK TEST	0.000	11:46
EXTERNAL STANDARD	0.082	11:46
BLANK TEST	0.000	11:47
EXTERNAL STANDARD	0.082	11:47
BLANK TEST	0.000	11:48
EXTERNAL STANDARD	0.082	11:48
BLANK TEST	0.000	11:49
EXTERNAL STANDARD	0.081	11:49
BLANK TEST	0.000	11:50

Average = 0.0820Std Dev = 0.0007

## Diagnostic Check

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

INTERNAL STANDARD

TEMPERATURES Sample Chamber = 49.2°C PASSED = 48.1°C PASSED Breath Tube PUMP INFO Flow Rate = 4.182 L/MPASSED DETECTOR INFO PASSED PUMP ON PUMP OFF PASSED FILTER INFO Filter 1 PASSED Filter 2 PASSED Filter 3 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.

3/13/18

Charles R. Foster Scientific Director

State Breath Alcohol Program

Subscribed and sworn before me this \_\_/3day of \_\_3\_, 20\_\_/8

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

PASSED