

VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument

State of Alaska

Serial #: 100346

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date: 05/30/2019

External Standard Test Values

EXTERNAL STANDARD INFORMATION

NOMINAL: 0.080
TARGET AT 29.82: 0.080
LOT #: AG826101
EXPIRATION: 09/18/2020
TANK PRESSURE: 473 psi

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

Average = 0.0790
Std Dev = 0.0000

Diagnostic Check

VERSIONS

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

TEMPERATURES

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

PUMP INFO

Flow Rate = 4.500 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



COR 7/15/19