VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument

State of Alaska Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Serial #: 100358

Date:02/21/2025

External Standard Test Values			Diagnostic Check	
EXTERNAL STANDARD INF NOMINAL: 0.080 TARGET AT 28.98: 0.07 LOT #: 09523080A1 EXPIRATION: 05/05/202 TANK PRESSURE: 168 ps	7 25 1		VERSIONS DMT: 3.02 PIC: 3.03 Modem: 2.6 Questions: 2.2	
BLANK TEST INTERNAL STANDARD	VERIFIED		TEMPERATURES Sample Chamber = 48.7°C	PASSED
EXTERNAL STANDARD BLANK TEST EXTERNAL STANDARD	0.078		Breath Tube = 48.1°C	PASSED
BLANK TEST EXTERNAL STANDARD BLANK TEST	0.000 0.079 0.000	12:04	PUMP INFO Flow Rate = 4.350 L/M	PASSED
EXTERNAL STANDARD BLANK TEST	0.078	12:05	DETECTOR INFO PUMP ON	PASSED
EXTERNAL STANDARD BLANK TEST	0.079		PUMP OFF	PASSED
Average = 0.0784 Std Dev = 0.0005			FILTER INFO Filter 1 Filter 2	PASSED PASSED
Std Dev - 0.0003			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



Date: 3 Tech Reviewer Initials: signed