VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument

State of Alaska

Serial #: 100692

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:05/08/2025

External Standard Test Values			Diagnostic	Diagnostic Check	
EXTERNAL STANDARD INF	ORMATION				
NOMINAL: 0.080			VERSIONS		
TARGET AT 29.81: 0.08	0		DMT: 3.02		
LOT #: AG335202	0		PIC: 3.03		
EXPIRATION: 12/18/2025			Modem: 2.6		
TANK PRESSURE: 1123 psi			Questions: 2.2		
TANK FRESSORE. 1125 P	51		Quescions. 2.2		
BLANK TEST	0.000	09:05	TEMPERATURES		
INTERNAL STANDARD	VERIFIED	09:06			
EXTERNAL STANDARD	0.079	09:06	Sample Chamber = 49.1°C	PASSED	
BLANK TEST	0.000	09:07	Breath Tube = 44.7°C	PASSED	
EXTERNAL STANDARD	0.079	09:07			
BLANK TEST	0.000	09:08	PUMP INFO		
EXTERNAL STANDARD	0.079	09:08	Flow Rate = 4.307 L/M	PASSED	
BLANK TEST		09:09			
EXTERNAL STANDARD		09:09	DETECTOR INFO		
BLANK TEST		09:10	PUMP ON	PASSED	
EXTERNAL STANDARD		09:10	PUMP OFF	PASSED	
BLANK TEST		09:11			
			FILTER INFO		
Average = 0.0788			Filter 1	PASSED	
Std Dev = 0.0004			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.

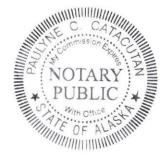
(5) The above is a true and accurate verification of calibration, which is performed by the instrument's software, as specified by the State Breath Alcohol Program. Verification of calibration is a regularly conducted and regularly recorded activity of the State Breath Alcohol Program.
(6) As of the 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 <u>02</u> day of <u>07</u>, 20 <u>25</u>

Notary Public My Commission Expires With Office





Date: ()

Tech Reviewer Initials: