VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument

State of Alaska

Serial #: 100398

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:09/05/2018

	External St	andard Test	Values	Diagnostic Check	
NOM TAR LOT EXP	ERNAL STANDARD INFO INAL: 0.080 GET AT 30.18: 0.081 #: AG634001 IRATION: 12/05/2018 K PRESSURE: 995 psi			VERSIONS DMT: 3.02 PIC: 3.02 Modem: 2.6 Questions: 2.2	
BLA	NK TEST	0.000	12:02	TEMPERATURES	
INT	ERNAL STANDARD	VERIFIED	12:02		
EXT	ERNAL STANDARD	0.079		Sample Chamber = 49.1°C	PASSED
BLA	NK TEST	0.000	12:03	Breath Tube = 48.1°C	PASSED
EXT	ERNAL STANDARD	0.079	12:03		
BLA	NK TEST	0.000	12:04	PUMP INFO	
EXTI	ERNAL STANDARD	0.080	12:04	Flow Rate = 4.921 L/M	PASSED
BLA	NK TEST	0.000	12:05		
EXT	ERNAL STANDARD	0.079	12:05	DETECTOR INFO	
BLA	NK TEST	0.000	12:06	PUMP ON	PASSED
EXT	ERNAL STANDARD	0.079	12:06	PUMP OFF	PASSED
BLA	NK TEST	0.000	12:07		
				FILTER INFO	
Ave	rage = 0.0792			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 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.

10/30/18

Charles R. Foster Scientific Director State Breath Alcohol Program

Subscribed and sworn before me this 30 day of 0ct, 20 18

SI

Kurt R. Palmer Sr., Notary Public My Commission Expires With Office





0310/0/18