VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument

State of Alaska

Serial #: 100680

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:9/5/2024

External Standard Test Values				Diagnostic Check	
EXTERNAL STANDARD INF NOMINAL: 0.080 TARGET AT 29.16: 0.07 LOT #: 09523080A1 EXPIRATION: 5/5/2025 TANK PRESSURE: 758 ps	8			VERSIONS DMT: 3.02 PIC: 3.03 Modem: 2.6 Questions: 2.2	
BLANK TEST INTERNAL STANDARD	0.000 VERIFIED	12:02		TEMPERATURES	
EXTERNAL STANDARD BLANK TEST EXTERNAL STANDARD	0.077 0.000 0.076	12:03		Sample Chamber = 48.7°C Breath Tube = 43.6°C	PASSED PASSED
BLANK TEST EXTERNAL STANDARD BLANK TEST	0.000 0.075 0.000	12:04		PUMP INFO Flow Rate = 4.463 L/M	PASSED
EXTERNAL STANDARD BLANK TEST	0.075	12:06 12:06		DETECTOR INFO PUMP ON	PASSED
EXTERNAL STANDARD BLANK TEST	0.076			PUMP OFF FILTER INFO	PASSED
Average = 0.0758 Std Dev = 0.0008				Filter 1 Filter 2 Filter 3	PASSED PASSED PASSED
				INTERNAL STANDARD	PASSED

I, Derek J. Walton, 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) 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.

Derek J. Walton Scientific Director State Breath Alcohol Program

Subscribed and sworn before me this <u>1</u> day of <u>10</u>, 20 <u>29</u>

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Notary Public My Commission Expires With Office



