

VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument
State of Alaska

Serial #: 100361

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date: 04/11/2011

External Standard Test Values

EXTERNAL STANDARD INFORMATION

NOMINAL: 0.080
TARGET AT 29.67: 0.079
LOT #: 02511080A3
EXPIRATION: 02/01/2013

BLANK TEST	0.000	12:02
INTERNAL STANDARD	VERIFIED	12:02
EXTERNAL STANDARD	0.081	12:02
BLANK TEST	0.000	12:03
EXTERNAL STANDARD	0.080	12:04
BLANK TEST	0.000	12:05
EXTERNAL STANDARD	0.080	12:05
BLANK TEST	0.000	12:06
EXTERNAL STANDARD	0.079	12:06
BLANK TEST	0.000	12:07
EXTERNAL STANDARD	0.080	12:07
BLANK TEST	0.000	12:08

Average = 0.0800
Std Dev = 0.0007

Diagnostic Check

VERSIONS

DMT: 1.01
PIC: 3.02
Modem: 2.0
Questions: 2.2

TEMPERATURES

Sample Chamber = 48.8°C PASSED
Breath Tube = 48.1°C PASSED

PUMP INFO

Flow Rate = 4.499 L/M PASSED

DETECTOR INFO

PUMP ON PASSED
PUMP OFF PASSED

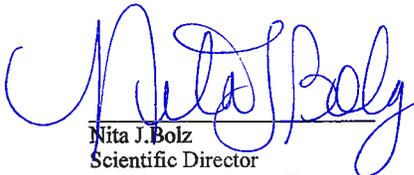
FILTER INFO

Filter 1 PASSED
Filter 2 PASSED
Filter 3 PASSED

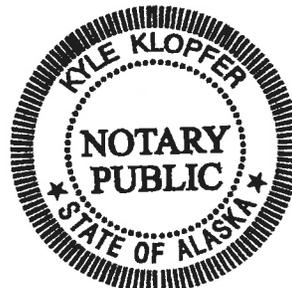
INTERNAL STANDARD PASSED

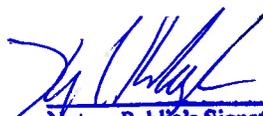
I, Nita J. Bolz, after being first duly sworn, depose and state as follows:

- (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.

 5/31/11
Nita J. Bolz
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 31 day of MAY, 20 11




Notary Public's Signature
My Commission Expires on WITH OFFICE
KYLE KLOPFER
Notary Name


4/11/11