# VERIFICATION OF CALIBRATION REPORT <br> of DataMaster dmt Breath Test Instrument State of Alaska <br> Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program 

Serial \#: 100689
Date:10/24/2023

## External Standard Test Values

EXTERNAL STANDARD INFORMATION
NOMINAL: 0.080
TARGET AT 30.48: 0.082
LOT \#: AG135004
EXPIRATION: $12 / 16 / 2023$
TANK PRESSURE: 1063 psi

| BLANK TEST | 0.000 | $12: 02$ |
| :--- | ---: | ---: |
| INTERNAL STANDARD | VERIFIED | $12: 02$ |
| EXTERNAL STANDARD | 0.079 | $12: 02$ |
| BLANK TEST | 0.000 | $12: 03$ |
| EXTERNAL STANDARD | 0.080 | $12: 03$ |
| BLANK TEST | 0.000 | $12: 04$ |
| EXTERNAL STANDARD | 0.079 | $12: 04$ |
| BLANK TEST | 0.000 | $12: 05$ |
| EXTERNAL STANDARD | 0.080 | $12: 05$ |
| BLANK TEST | 0.000 | $12: 06$ |
| EXTERNAL STANDARD | 0.080 | $12: 06$ |
| BLANK TEST | 0.000 | $12: 07$ |

Average $=0.0796$
Std Dev $=0.0005$

## Diagnostic Check

```
VERSIONS
DMT: 3.02
PIC: 3.07
Modem: 2.6
Questions: 2.2
TEMPERATURES
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Sample Chamber $=48.7^{\circ} \mathrm{C} \quad$ PASSED
Breath Tube $=43.2{ }^{\circ} \mathrm{C}$ PASSED
PUMP INFO
Flow Rate $=4.034 \mathrm{~L} / \mathrm{M}$ PASSED
DETECTOR INFO
PUMP ON PASSED
PUMP OFF PASSED
FILTER INFO PASSED
Filter 1 PASSED
Filter 2 PASSED
Filter 3 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.


Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 22 day of 11,2023


My Commission Expires With Office


