VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:01/03/2020

External Standard Test Values

EXTERNAL STANDARD INFORMATION

NOMINAL: 0.080

Serial #: 100418

TARGET AT 29.44: 0.079

LOT #: AG826101

EXPIRATION: 09/18/2020 TANK PRESSURE: 992 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	0.079	12:03
BLANK TEST	0.000	12:04
EXTERNAL STANDARD	0.079	12:04
BLANK TEST	0.000	12:05
EXTERNAL STANDARD	0.079	12:05
BLANK TEST	0.000	12:06
EXTERNAL STANDARD	0.079	12:06
BLANK TEST	0.000	12:07

Average = 0.0790 Std Dev = 0.0000

Diagnostic Check

VERSIONS DMT: 3.02 PIC: 3.02 Modem: 2.6 Questions: 2.2

TEMPERATURES

Sample Chamber = 48.7°C PASSED Breath Tube $= 45.1^{\circ}C$ PASSED PUMP INFO Flow Rate = 4.537 L/MPASSED DETECTOR INFO PASSED PUMP ON PUMP OFF PASSED FILTER INFO Filter 1 PASSED Filter 2 PASSED PASSED Filter 3 INTERNAL STANDARD PASSED

- I, Brandi M. Barnett, 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.

Brandi M. Barnett Scientific Director

State Breath Alcohol Program

Subscribed and sworn before me this 304 day of _____, 20 20

Notary Public

My Commission Expires With Office





COB 1/21/2020