VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument State of Alaska

Serial #: 100695

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:02/25/2020

External Standard Test Values			Diagnostic Check	
EXTERNAL STAND	ARD INFORMATION			
NOMINAL: 0.080			VERSIONS	
TARGET AT 28.74: 0.077			DMT: 3.02	
LOT #: AG923401			PIC: 3.03	
EXPIRATION: 08/22/2021			Modem: 2.6	
TANK PRESSURE: 1186 psi			Questions: 2.2	
BLANK TEST	0.000	13:10	TEMPERATURES	
INTERNAL STAND	ARD VERIFIED	13:10		
EXTERNAL STAND	ARD 0.077	13:10	Sample Chamber = 49.0°C	PASSED
BLANK TEST	0.000	13:11	Breath Tube = 46.6°C	PASSED
EXTERNAL STAND	ARD 0.077	13:11		
BLANK TEST	0.000	13:12	PUMP INFO	
EXTERNAL STAND	ARD 0.077	13:12	Flow Rate = 4.216 L/M	PASSED
BLANK TEST	0.000	13:13		
EXTERNAL STAND	ARD 0.077	13:13	DETECTOR INFO	
BLANK TEST	0.000	13:14	PUMP ON	PASSED
EXTERNAL STAND	ARD 0.077	13:15	PUMP OFF	PASSED
BLANK TEST	0.000	13:15		
			FILTER INFO	
Average = 0.07	70		Filter 1	PASSED
Std Dev = 0.00	00		Filter 2	PASSED
			Filter 3	PASSED
			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.

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Frandi M. Barnett Scientific Director State Breath Alcohol Program

_ day of _____, 20 D Subscribed and sworn before me this

Notary Public

My Commission Expires With Office





Jm 12/25/20