VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

VERSTONS

Date: 05/30/2019

External Standard Test Values

EXTERNAL STANDARD INFORMATION

NOMINAL: 0.080

Serial #: 100421

TARGET AT 29.72: 0.079 LOT #: AG826101 EXPIRATION: 09/18/2020 TANK PRESSURE: 727 psi

BLANK TEST	0.000	11:40
INTERNAL STANDARD	VERIFIED	11:40
EXTERNAL STANDARD	0.079	11:40
BLANK TEST	0.000	11:41
EXTERNAL STANDARD	0.079	11:41
BLANK TEST	0.000	11:42
EXTERNAL STANDARD	0.080	11:42
BLANK TEST	0.000	11:43
EXTERNAL STANDARD	0.080	11:43
BLANK TEST	0.000	11:44
EXTERNAL STANDARD	0.080	11:44
BLANK TEST	0.000	11:45

Average = 0.0796Std Dev = 0.0005

Diagnostic Check

VERSIONS	
DMT: 3.02	
PIC: 3.02	
Modem: 2.6	
Questions: 2.2	
TEMPERATURES	
Sample Chamber = 48.7°C	PASSED
Breath Tube = 46.3°C	
PUMP INFO	
Flow Rate = 4.725 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, Charles R. Foster, 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.

6/7/19

(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.

Charles R. Foster Scientific Director

State Breath Alcohol Program

Subscribed and sworn before me this ____ day of Jun_ 2019

My Commission Expires With Office



COB 6/3/19