VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument State of Alaska

Serial #: 100344

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:11/15/2017

External S	standard Test Values	Diagnostic	Diagnostic Check	
EXTERNAL STANDARD INF	ORMATION			
NOMINAL: 0.080		VERSIONS		
TARGET AT 29.99: 0.080		DMT: 3.02		
LOT #: AG608504		PIC: 3.02	PIC: 3.02	
EXPIRATION: 03/25/2018		Modem: 2.6		
TANK PRESSURE: 632 psi		Questions: 2.2		
BLANK TEST	0.000 13:50	TEMPERATURES		
INTERNAL STANDARD	VERIFIED 13:50			
EXTERNAL STANDARD	0.079 13:50	Sample Chamber = 49.0°C	PASSED	
BLANK TEST	0.000 13:51	Breath Tube = 48.1°C	PASSED	
EXTERNAL STANDARD	0.079 13:51			
BLANK TEST	0.000 13:52	PUMP INFO		
EXTERNAL STANDARD	0.079 13:53	Flow Rate = 5.957 L/M	PASSED	
BLANK TEST	0.000 13:53			
EXTERNAL STANDARD	0.079 13:54	DETECTOR INFO		
BLANK TEST	0.000 13:55	PUMP ON	PASSED	
EXTERNAL STANDARD	0.079 13:55	PUMP OFF	PASSED	
BLANK TEST	0.000 13:56			
		FILTER INFO		
Average = 0.0790		Filter 1	PASSED	
Std Dev = 0.0000		Filter 2	PASSED	
		Filter 3	PASSED	
		INTERNAL STANDARD	PASSED	
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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.

(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.

12/1/17

Charles R. Foster Scientific Director State Breath Alcohol Program

Subscribed and sworn before me this 01 day of 12, 20 17

Carlie K. Bailey, Notary Public My Commission Expires With Office





COB "/29/17