## VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument State of Alaska

Serial #: 100344

## Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:02/21/2021

External Standard Test Values			Diagnostic C	Diagnostic Check	
EXTERNAL STANDARD INF	FORMATION				
NOMINAL: 0.080			VERSIONS		
TARGET AT 29.28: 0.07	78		DMT: 3.02		
LOT #: AG923401			PIC: 3.02		
EXPIRATION: 08/22/2021			Modem: 2.6		
TANK PRESSURE: 273 ps	si		Questions: 2.2		
BLANK TEST	0.000	12:02	TEMPERATURES		
INTERNAL STANDARD	VERIFIED	12:02			
EXTERNAL STANDARD	0.077	12:02	Sample Chamber = 48.9°C	PASSED	
BLANK TEST	0.000	12:03	Breath Tube = 48.1°C	PASSED	
EXTERNAL STANDARD	0.077	12:03			
BLANK TEST	0.000	12:04	PUMP INFO		
EXTERNAL STANDARD	0.076	12:04	Flow Rate = 5.785 L/M	PASSED	
BLANK TEST	0.000	12:05			
EXTERNAL STANDARD	0.077	12:05	DETECTOR INFO		
BLANK TEST	0.000	12:06	PUMP ON	PASSED	
EXTERNAL STANDARD	0.077	12:06	PUMP OFF	PASSED	
BLANK TEST	0.000	12:07			
			FILTER INFO		
Average = $0.0768$			Filter 1	PASSED	
Std Dev = $0.0004$			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.

Brandi M. Barnett Scientific Director State Breath Alcohol Program

day of <u>4</u>, 20 <u>21</u> Subscribed and sworn before me this

Notary Public My Commission Expires With Office



