VERIFICATION OF CALIBRATION REPORT

Serial #: 100666

of DataMaster dmt Breath Test Instrument State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program D

Date:01/03/2022

| External Standard Test Values | | | Diagnostic Check | |
|--|-------------------------|----------------|--|------------------|
| EXTERNAL STANDARD INFORMATION NOMINAL: 0.080 TARGET AT 29.92: 0.080 LOT #: AG113402 EXPIRATION: 05/14/2023 | | | VERSIONS DMT: 3.02 PIC: 3.03 Modem: 2.6 | |
| TANK PRESSURE: 1136 p | osi | | Questions: 2.2 | |
| BLANK TEST INTERNAL STANDARD EXTERNAL STANDARD | 0.000 VERIFIED | | TEMPERATURES | 210022 |
| BLANK TEST EXTERNAL STANDARD | 0.000 0.079 | 12:03 12:03 | Sample Chamber = 48.9°C Breath Tube = 45.3°C | PASSED |
| BLANK TEST EXTERNAL STANDARD BLANK TEST | 0.000 0.079 0.000 | 12:04 | PUMP INFO Flow Rate = 4.133 L/M | PASSED |
| EXTERNAL STANDARD BLANK TEST EXTERNAL STANDARD | 0.079 0.000 0.080 | 12:06 | DETECTOR INFO PUMP ON PUMP OFF | PASSED PASSED |
| BLANK TEST Average = 0.0792 | 0.000 | 12:07 | FILTER INFO Filter 1 | PASSED |
| Std Dev = 0.0004 | | | Filter 2 Filter 3 | PASSED PASSED |
| | | | INTERNAL STANDARD | PASSED |
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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.

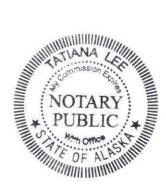
(5) The above is a true and accurate verification of calibration, which is performed by the instrument's software, as specified by the State Breath Alcohol Program. Verification of calibration is a regularly conducted and regularly recorded activity of the State Breath Alcohol Program.(6) As of the date signed below, I certify that the calibration of the referenced instrument was accurate on the date in which the above tests were performed and therefore certified for evidentiary use in the State of Alaska.

indi M. Barnett

Scientific Director State Breath Alcohol Program

Subscribed and sworn before me this $\underline{0}$ day of $\underline{02}$, 20 22

Notary Public My Commission Expires With Office





COB'/25/22