VERIFICATION OF CALIBRATION REPORT

of DataMaster dut Breath Test Instrument State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date: 10/24/2022

External Standard Test Values

EXTERNAL STANDARD INFORMATION

NOMINAL: 0.080

Serial #: 100689

TARGET AT 29.97: 0.080 LOT #: AG135004

EXPIRATION: 12/16/2023

TANK PRESSURE: 959 psi

| BLANK TEST | 0.000 | 12:02 |
|-------------------|----------|-------|
| INTERNAL STANDARD | VERIFIED | 12:02 |
| EXTERNAL STANDARD | 0.079 | 12:02 |
| BLANK TEST | 0.000 | 12:03 |
| EXTERNAL STANDARD | 0.079 | 12:03 |
| BLANK TEST | 0.000 | 12:04 |
| EXTERNAL STANDARD | 0.079 | 12:04 |
| BLANK TEST | 0.000 | 12:05 |
| EXTERNAL STANDARD | 0.079 | 12:05 |
| BLANK TEST | 0.000 | 12:06 |
| EXTERNAL STANDARD | 0.079 | 12:06 |
| BLANK TEST | 0.000 | 12:07 |
| | | |

Average = 0.0790 Std Dev = 0.0000

Diagnostic Check

VERSIONS DMT: 3.02 PIC: 3.07 Modem: 2.6 Questions: 2.2

| TE | MPERATURES | |
|----------|---|----------------------------|
| | mple Chamber = 48.8°C eath Tube = 42.5°C | PASSED PASSED |
| | MP INFO ow Rate = 4.002 L/M | PASSED |
| PU | TECTOR INFO MP ON MP OFF | PASSED PASSED |
| Fi Fi | LTER INFO lter 1 lter 2 lter 3 | PASSED PASSED PASSED |
| IN | TERNAL STANDARD | PASSED |

- I, Derek J. Walton, 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.

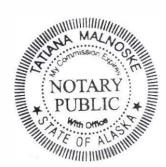
Scientific Director

State Breath Alcohol Program

Subscribed and sworn before me this Do day of 12, 20 1212

Notary Public

My Commission Expires With Office





COB"/14/20