VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument State of Alaska

Serial #: 100397

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:02/21/2020

External Standard Test Values		Diagnostic Check	
EXTERNAL STANDARD INF	ORMATION		
NOMINAL: 0.080		VERSIONS	
TARGET AT 29.42: 0.07	9	DMT: 3.02	
LOT #: AG826101		PIC: 3.02	
EXPIRATION: 09/18/202		Modem: 2.6	
TANK PRESSURE: 667 ps	1	Questions: 2.2	
BLANK TEST	0.000 12:02	TEMPERATURES	
INTERNAL STANDARD	VERIFIED 12:02		
EXTERNAL STANDARD	0.078 12:02	Sample Chamber = 48.8°C	PASSED
BLANK TEST	0.000 12:03	Breath Tube = 48.1°C	PASSED
EXTERNAL STANDARD	0.078 12:03		
BLANK TEST	0.000 12:04	PUMP INFO	
EXTERNAL STANDARD	0.078 12:04	Flow Rate = 4.162 L/M	PASSED
BLANK TEST	0.000 12:05		
EXTERNAL STANDARD	0.078 12:05	DETECTOR INFO	
BLANK TEST	0.000 12:06	PUMP ON	PASSED
EXTERNAL STANDARD	0.078 12:06	PUMP OFF	PASSED
BLANK TEST	0.000 12:07		
		FILTER INFO	
Average = 0.0780		Filter 1	PASSED
Std Dev = 0.0000		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 _____, 20 20 Subscribed and sworn before me this,

Notary Public

My Commission Expires With Office





MV 03 03/20