## VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument State of Alaska

Serial #: 100360

## Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:03/19/2018

External Standard Test Values			Diagnostic Check	
EXTERNAL STANDARD INF	ORMATION			
NOMINAL: 0.080			VERSIONS	
TARGET AT 29.97: 0.08	0		DMT: 3.02	
LOT #: AG634001			PIC: 3.03	
EXPIRATION: 12/05/2018			Modem: 2.6	
TANK PRESSURE: 1254 psi			Questions: 2.2	
BLANK TEST	0.000	11:02	TEMPERATURES	
INTERNAL STANDARD	VERIFIED	11:02		
EXTERNAL STANDARD	0.079	11:02	Sample Chamber = 48.7°C	PASSED
BLANK TEST	0.000	11:03	Breath Tube = 45.0°C	PASSED
EXTERNAL STANDARD	0.080	11:03		
BLANK TEST	0.000	11:04	PUMP INFO	
EXTERNAL STANDARD	0.080	11:04	Flow Rate = $4.853 \text{ L/M}$	PASSED
BLANK TEST	0.000	11:05		
EXTERNAL STANDARD	0.080	11:05	DETECTOR INFO	
BLANK TEST	0.000	11:06	PUMP ON	PASSED
EXTERNAL STANDARD	0.080	11:06	PUMP OFF	PASSED
BLANK TEST	0.000	11:07		
			FILTER INFO	
Average = $0.0798$			Filter 1	PASSED
Std Dev = 0.0004			Filter 2	PASSED
			Filter 3	PASSED
			INTERNAL STANDARD	PASSED

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.

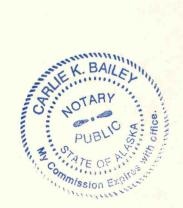
4/25/18

Charles R. Foster Scientific Director State Breath Alcohol Program

Subscribed and sworn before me this 25 day of  $\underline{09}$ , 20  $\underline{18}$ 

K. Bailey, Notary Public

My Commission Expires With Office





COB 3/19/18