VERIFICATION OF CALIBRATION REPORT

of DataMaster dmt Breath Test Instrument

State of Alaska

Serial #: 100690

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Date:10/24/2023

External Standard Test Values			Diagnostic Check	
EXTERNAL STANDARD INF NOMINAL: 0.080 TARGET AT 29.90: 0.08 LOT #: AG135004 EXPIRATION: 12/16/202 TANK PRESSURE: 1121 p	0		VERSIONS DMT: 3.02 PIC: 3.03 Modem: 2.6 Questions: 2.2	
BLANK TEST INTERNAL STANDARD		12:02	TEMPERATURES	
EXTERNAL STANDARD BLANK TEST EXTERNAL STANDARD BLANK TEST	0.079	12:02 12:03 12:03	Sample Chamber = 48.9°C Breath Tube = 45.2°C PUMP INFO	PASSED PASSED
EXTERNAL STANDARD BLANK TEST	0.079 0.000		Flow Rate = 4.154 L/M	PASSED
EXTERNAL STANDARD	0.000		DETECTOR INFO	
BLANK TEST	0.000		PUMP ON	PASSED
EXTERNAL STANDARD	0.079		PUMP OFF	PASSED
BLANK TEST	0.000	12:07	DILMED INDO	
Average = 0.0790			FILTER INFO Filter 1	DAGGED
Std Dev = 0.0000			Filter 2	PASSED
			Filter 3	PASSED
			INTERNAL 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.

War

Derek J. Walton Scientific Director State Breath Alcohol Program

Subscribed and sworn before me this **22** day of <u>11</u>, 20 <u>23</u>

Notary Public My Commission Expires With Office





