



Division of Criminal Justice Services

CERTIFICATION PURSUANT TO CPLR 4518 OF RECORDS MAINTAINED IN THE REGULAR COURSE OF BUSINESS

I, Martin Schilling, Highway Safety Equipment Technician 2, Office of Public Safety, New York State Division of Criminal Justice Services, 80 South Swan Street, Albany, New York 12210, having been duly designated and authorized by the Commissioner of the Division of Criminal Justice Services, do hereby certify and authenticate, as provided by subdivision c of Rule 4518 of the Civil Practice Law and Rules, that the document annexed hereto is an exact copy of an electronic record of the Office of Public Safety which is in my possession, custody and control. This record, once created, is stored in an electronic format that cannot thereafter be altered or modified.

I further certify that the original electronic record of inspection/maintenance/calibration of NATL PATENT ANALYTICAL SYSTEM, DATAMASTER DMT breath test instrument, serial number 138506, performed on December 29, 2025 by Office of Public Safety employee Jonathan Mascolo, of which the annexed is an exact copy, was made in the regular course of business of the New York State Division of Criminal Justice Services, Office of Public Safety, that such record was made at the time such inspection/ maintenance/calibration was performed or within a reasonable time thereafter, and further that it is the regular course of the Office of Public Safety's business to make such records at the time such inspection/maintenance /calibration is performed, or within a reasonable time thereafter, and to provide such instrument's records to the agency that requested them.

A handwritten signature in black ink, appearing to read "Martin J. Schilling".

Digitally signed under ESRA
by Martin Schilling
on 12/30/2025 06:59 AM

Martin Schilling
Highway Safety Equipment Technician 2
Office of Public Safety

**BREATH TEST INSTRUMENT
RECORD OF INSPECTION / MAINTENANCE / CALIBRATION**

Name of Submitting Agency: Solvay Village Police Department

Manufacturer: NATL PATENT ANALYTICAL SYSTEM

Model: DATAMASTER DMT

Serial Number: 138506

Date: December 29, 2025

Reference Solution Lot Number : 25281

Reference Solution Standard : 0.10% at 34.0 degrees centigrade

Test No	Test Result	Simulator Temperature
1	0.099 %	34.00 degrees centigrade
2	0.099 %	34.01 degrees centigrade
3	0.099 %	34.01 degrees centigrade
4	0.100 %	34.00 degrees centigrade

Reference Solution Lot Number : 25341

Reference Solution Standard : 0.08% at 34.0 degrees centigrade

Test No	Test Result	Simulator Temperature
1	0.082 %	34.00 degrees centigrade
2	0.081 %	34.00 degrees centigrade
3	0.081 %	34.00 degrees centigrade
4	0.081 %	34.01 degrees centigrade

Reference Solution Lot Number : 25220

Reference Solution Standard : 0.18% at 34.0 degrees centigrade

Test No	Test Result	Simulator Temperature
1	0.179 %	34.01 degrees centigrade
2	0.181 %	34.01 degrees centigrade
3	0.180 %	34.00 degrees centigrade
4	0.181 %	34.00 degrees centigrade

I hereby certify that I have performed any necessary maintenance procedures and calibrated NATL PATENT ANALYTICAL SYSTEM breath test instrument model DATAMASTER DMT, serial number 138506, and have determined that it is accurate and reliable for the determination of ethyl alcohol in the blood by analysis of the breath. The instrument's test results are recorded above and this instrument satisfies all limits and standards established by the New York State Commissioner of Health as enumerated in Part 59, Subchapter D of Chapter II, TITLE 10 (Health) of the Official Compilation of Codes, Rules and Regulations of the State of New York, (10 NYCRR Part 59) as amended.

I further certify that I made the entries in these records of inspection/maintenance/calibration at the time that such inspection/maintenance/calibration of the above identified breath test instrument was performed, or within a reasonable time thereafter.

Performed by:



Digitally signed under ESRA
by Jonathan Mascolo
on 12/29/2025 01:52 PM

Reviewed by:



Digitally signed under ESRA
by Frank Sgarlata
on 12/29/2025 02:34 PM

Jonathan Mascolo
Highway Safety Equipment Technician
Breath Analysis Operator Permit #45339

Frank Sgarlata
Breath Analysis Technical Supervisor

**BREATH TEST INSTRUMENT
RECORD OF INSPECTION / MAINTENANCE / CALIBRATION**

Name of Submitting Agency: Solvay Village Police Department

Manufacturer: NATL PATENT ANALYTICAL SYSTEM

Model: DATAMASTER DMT

Serial Number: 138506

Date: December 29, 2025

1. General appearance and condition of this device -----: OK

2. Check controls and indicators -----: OK

3. Check breath flow system -----: OK

4. Check printer operation -----: OK

5. System cycles through all modes -----: OK



Division of Criminal
Justice Services

6. Record any repairs made to this instrument and list services provided : INSPECTED INSTRUMENT, CHECKED SETUP VOLTAGES, PRINT AND REMOTE OPERATION. PERFORMED CALIBRATION/ADJUSTMENT PROCEDURE, RAN SUBJECT, TECHNICIAN AND DIAGNOSTIC TESTS, VERIFIED CALIBRATION.

THIS CERTIFICATE EXPIRES 365 DAYS FROM THE DATE AT THE TOP OF THIS PAGE.

Performed by:

Handwritten signature of Jonathan Mascolo.

Digitally signed under ESRA
by Jonathan Mascolo
on 12/29/2025 01:52 PM

Reviewed by:

Handwritten signature of Frank Sgarlata.

Digitally signed under ESRA
by Frank Sgarlata
on 12/29/2025 02:34 PM

Jonathan Mascolo
Highway Safety Equipment Technician
Breath Analysis Operator Permit #45339

Frank Sgarlata
Breath Analysis Technical Supervisor

TECHNICIAN TEST

SOLVAY VILLAGE
POLICE DEPT
DATAMASTER dmt: 138506

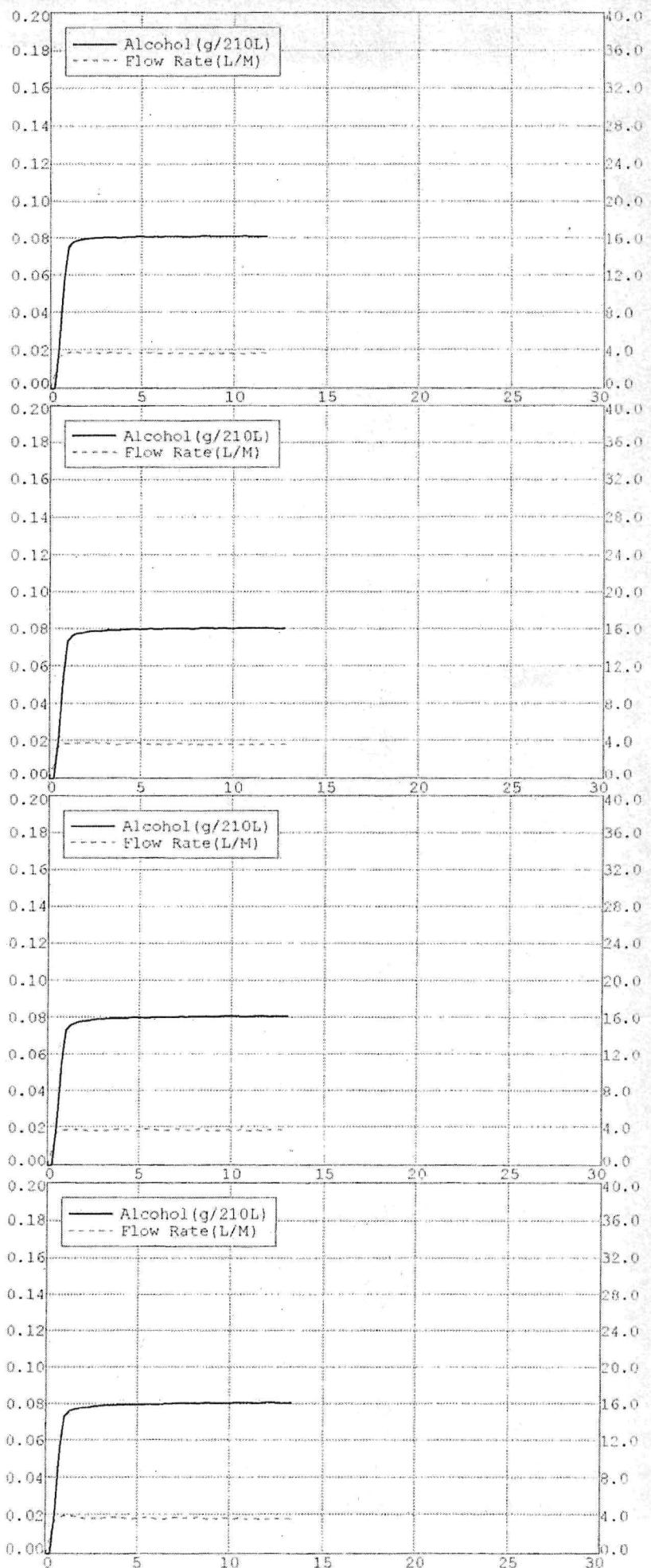
Date: 12/29/2025

OPERATOR NAME:
JONATHAN M MASCOLO
Permit #: 45339
Operator Agency/Dept: SOLVAY VILLAGE PD
Reference Standard #: 25341

Nominal = 0.080 g/210L

BLANK TEST	0.000	12:01
INTERNAL STANDARD	VERIFIED	12:01
REFERENCE STANDARD TEMP	34.00c	
REFERENCE STANDARD	0.082	12:01
BLANK TEST	0.000	12:02
REFERENCE STANDARD TEMP	34.00c	
REFERENCE STANDARD	0.081	12:02
BLANK TEST	0.000	12:03
REFERENCE STANDARD TEMP	34.00c	
REFERENCE STANDARD	0.081	12:03
BLANK TEST	0.000	12:04
REFERENCE STANDARD TEMP	34.01c	
REFERENCE STANDARD	0.081	12:05
BLANK TEST	0.000	12:06

Average = 0.0812
Std Dev = 0.0005



TECHNICIAN TEST

SOLVAY VILLAGE
POLICE DEPT
DATAMASTER dmt: 138506

Date: 12/29/2025

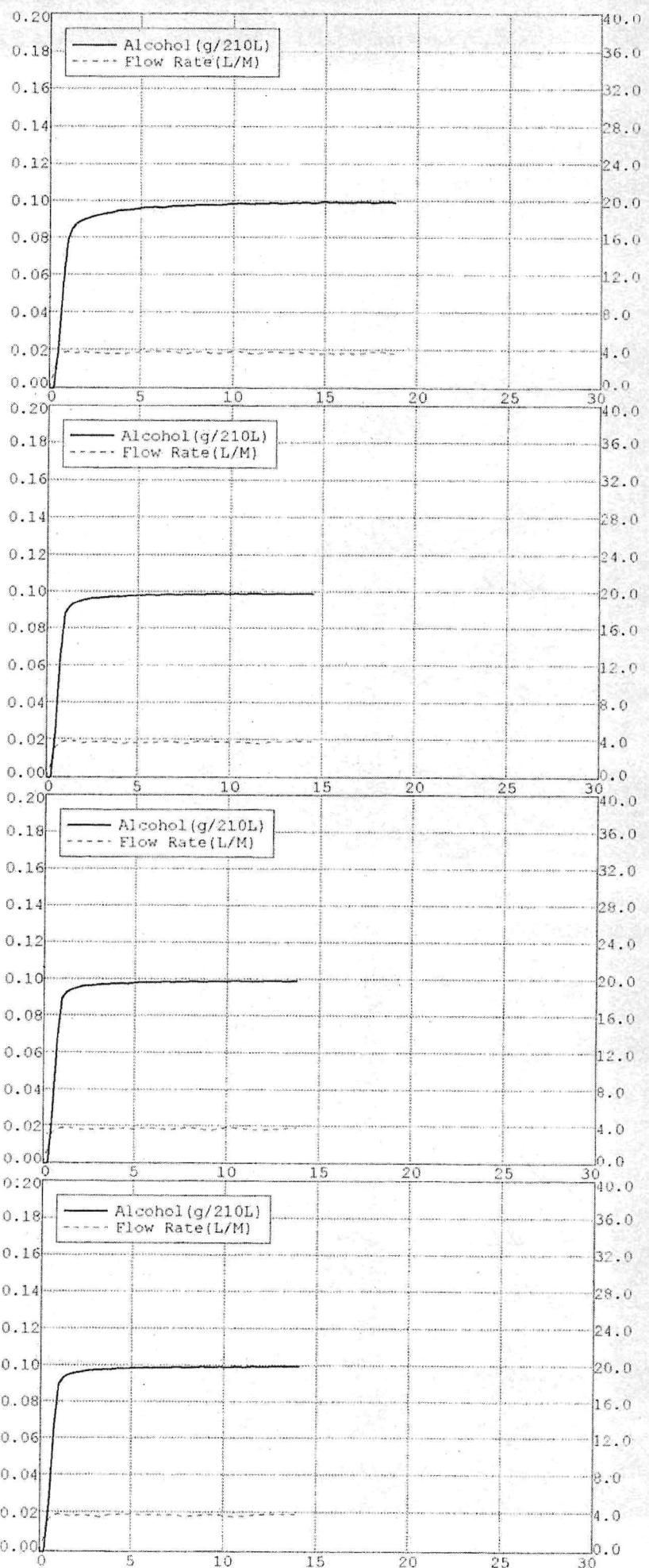
OPERATOR NAME:
JONATHAN M MASCOLO
Permit #: 45339
Operator Agency/Dept: SOLVAY VILLAGE PD
Reference Standard #: 25281

Nominal = 0.100 g/210L

BLANK TEST	0.000	12:08
INTERNAL STANDARD	VERIFIED	12:08
REFERENCE STANDARD TEMP	34.00c	
REFERENCE STANDARD	0.099	12:08
BLANK TEST	0.000	12:09
REFERENCE STANDARD TEMP	34.01c	
REFERENCE STANDARD	0.099	12:10
BLANK TEST	0.000	12:10
REFERENCE STANDARD TEMP	34.01c	
REFERENCE STANDARD	0.099	12:11
BLANK TEST	0.000	12:12
REFERENCE STANDARD TEMP	34.00c	
REFERENCE STANDARD	0.100	12:12
BLANK TEST	0.000	12:13

Average = 0.0992

Std Dev = 0.0005



TECHNICIAN TEST

SOLVAY VILLAGE
POLICE DEPT
DATAMASTER dmt: 138506

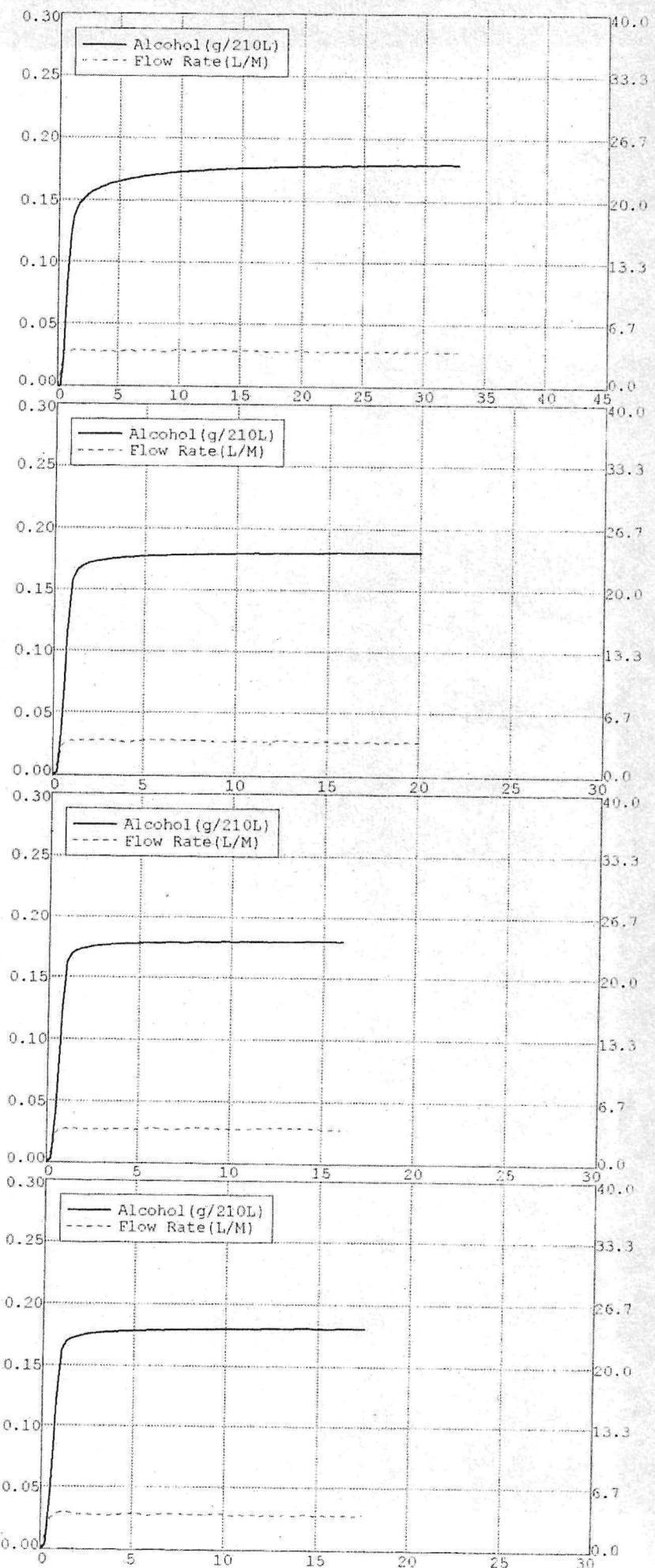
Date: 12/29/2025

OPERATOR NAME:
JONATHAN M MASCOLO
Permit #: 45339
Operator Agency/Dept: SOLVAY VILLAGE PD
Reference Standard #: 25220

Nominal = 0.180 g/210L

BLANK TEST	0.000	12:15
INTERNAL STANDARD	VERIFIED	12:15
REFERENCE STANDARD TEMP	34.01c	
REFERENCE STANDARD	0.179	12:16
BLANK TEST	0.000	12:17
REFERENCE STANDARD TEMP	34.01c	
REFERENCE STANDARD	0.181	12:17
BLANK TEST	0.000	12:18
REFERENCE STANDARD TEMP	34.00c	
REFERENCE STANDARD	0.180	12:19
BLANK TEST	0.000	12:20
REFERENCE STANDARD TEMP	34.00c	
REFERENCE STANDARD	0.181	12:20
BLANK TEST	0.000	12:21

Average = 0.1802
Std Dev = 0.0010



*12-29-25

SERVICE AUTHORIZATION FORM
Highway Safety Technology Unit
80 South Swan Street
Albany, NY 12210
Ph: 518-485-7636 / 518-402-0689
Fax: 518-457-6869

THIS FORM IS USED TO AUTHORIZE THE DIVISION OF CRIMINAL JUSTICE SERVICES TO PERFORM SERVICE ON THE INSTRUMENT IDENTIFIED. THIS AUTHORIZATION MUST ACCOMPANY EACH PIECE OF EQUIPMENT WHEN IT IS PRESENTED TO THE EQUIPMENT REPAIR CENTER FOR SERVICE. PLEASE SIGN AND DATE FORM.

SECTION I - AGENCY INFORMATION

Name of Agency <i>Solvay Police Dept</i>	Today's Date <i>12/29/25</i>
Address <i>507 Charles Ave</i>	City, State, ZIP <i>Solvay NY 13209</i>
Contact Person <i>John Eberle</i>	Contact Telephone
Contact Email <i>nelsenbeck@solvaypd.com</i>	Best Way to Reach You During Appointment Period <i>Phone</i>

SECTION II - INSTRUMENT INFORMATION

Instrument Manufacturer (Please Circle) <input checked="" type="checkbox"/> NPAS DMT <input type="checkbox"/> GUTH <input type="checkbox"/> Applied Concepts (Stalker) <input type="checkbox"/> Decatur (Genesis) <input type="checkbox"/> Kustom (Eagle/Falcon) <input type="checkbox"/> MPH <input type="checkbox"/> Alco-Sensor <input type="checkbox"/> Other:	
Model Number <i>Datamaster DMT*</i>	Instrument Serial Number <i>138506 DMT / MP4078 SIM</i>
Antenna Serial Number (if applicable) Antenna 1 -- <input type="checkbox"/> Antenna 2 -- <input type="checkbox"/>	Type of maintenance (check appropriate) <input checked="" type="checkbox"/> Calibration Check <input type="checkbox"/> Repair
Brief Description of Malfunction <i>annual Calibration check</i>	
List all parts, cables and/or accessories being submitted. Tuning forks must accompany all radar units (if applicable). (Please Circle)	
DMT/SIM: <input checked="" type="checkbox"/> DMT <input checked="" type="checkbox"/> SIM <input type="checkbox"/> Tubes <input checked="" type="checkbox"/> (1) breath tube <input type="checkbox"/> (1) simulator tube <input checked="" type="checkbox"/> Keyboard <input type="checkbox"/> Other: power supply cords	Radar: Control Unit <input type="checkbox"/> Antenna(s) <input type="checkbox"/> Antenna Cable(s) Power Cord <input type="checkbox"/> Forks <input type="checkbox"/> Other

I acknowledge I am signing this Service Authorization Form as an act and deed of said agency, organization, or municipality, and that I am duly authorized to sign same for the uses and purposes mentioned herein. PLEASE SIGN AND DATE.

Signature

Date

12/29/25

DCJS USE ONLY

Inspected instrument, checked setup voltages, print and remote operation. Performed calibration/adjustment procedure, can subject, technician and diagnostic tests, verified calibration.

*

CD 12-29-25



Division of Criminal Justice Services

CERTIFICATION PURSUANT TO CPLR 4518 OF RECORDS MAINTAINED IN THE REGULAR COURSE OF BUSINESS

I, Frank Sgarlata, Highway Safety Equipment Technician 2, Office of Public Safety, New York State Division of Criminal Justice Services, 80 South Swan Street, Albany, New York 12210, having been duly designated and authorized by the Commissioner of the Division of Criminal Justice Services, do hereby certify and authenticate, as provided by subdivision c of Rule 4518 of the Civil Practice Law and Rules, that the document annexed hereto is an exact copy of an electronic record of the Office of Public Safety which is in my possession, custody and control. This record, once created, is stored in an electronic format that cannot thereafter be altered or modified.

I further certify that the original electronic record of inspection/maintenance/calibration of GUTH LABORATORIES, 12V500 SIMULATOR, serial number MP4078, performed on December 29, 2025 by Office of Public Safety employee Jonathan Mascolo, of which the annexed is an exact copy, was made in the regular course of business of the New York State Division of Criminal Justice Services, Office of Public Safety, that such record was made at the time such inspection/ maintenance/calibration was performed or within a reasonable time thereafter, and further that it is the regular course of the Office of Public Safety's business to make such records at the time such inspection/maintenance /calibration is performed, or within a reasonable time thereafter, and to provide such instrument's records to the agency that requested them.

A handwritten signature in black ink that reads "Frank Sgarlata".

Digitally signed under ESRA
by Frank Sgarlata
on 12/29/2025 02:40 PM

Frank Sgarlata
Highway Safety Equipment Technician 2
Office of Public Safety

**SIMULATOR
RECORD OF INSPECTION / MAINTENANCE / CALIBRATION**

Name of Submitting Agency: Solvay Village Police Department

Manufacturer: GUTH LABORATORIES

Model: 12V500

Serial Number: MP4078

Date: December 29, 2025

Breath Simulator Temperature
34.02 degrees centigrade



**Division of Criminal
Justice Services**

I hereby certify that I have performed any necessary maintenance procedures and verified the calibration of GUTH LABORATORIES simulator model 12V500, serial number MP4078, and have determined that it is accurate.

I further certify that I made the entries in these records of inspection/maintenance/calibration at the time that such inspection/maintenance/calibration of the above identified simulator was performed, or within a reasonable time thereafter.

A handwritten signature in black ink that reads "Jonathan Mascolo".

Digitally signed under ESRA
by Jonathan Mascolo
on 12/29/2025 01:50 PM

**Jonathan Mascolo
Highway Safety Equipment Technician
Office of Public Safety**

**SIMULATOR
RECORD OF INSPECTION / MAINTENANCE / CALIBRATION**

Name of Submitting Agency: Solvay Village Police Department

Manufacturer: GUTH LABORATORIES

Model: 12V500

Serial Number: MP4078

Date: December 29, 2025

1. General appearance and condition of this device -----: OK

2. Check propeller rotation -----: OK

3. Check for air leaks -----: OK

4. Check for proper temperature -----: OK

**5. Record any repairs made to this instrument and list services provided : VERIFIED
CALIBRATION**



A handwritten signature in black ink that reads "Jonathan Mascolo".

Digitally signed under ESRA
by Jonathan Mascolo
on 12/29/2025 01:50 PM

**Jonathan Mascolo
Highway Safety Equipment Technician
Office of Public Safety**



625 East Bunker Court
Vernon Hills, Illinois 60061
PH: 866-466-6225
Fax: 847-327-2993
www.innocalsolutions.com

NIST Traceable Calibration Report

REPORT NUMBER

1777013

Reference Number: 180845700
PO Number: MSCHILLING013125

NY State Div Of Criminal Justice Svcs
80 South Swan Street
Albany, NY 12210 United States

Manufacturer:	Ertco	Calibration Date	02/24/2025
Model Number:	4400	Calibration Due Date	02/24/2026
Description:	Temperature, Dig thermometer w/probe	Condition As Found:	In Tolerance
Asset Number:	304001	Condition As Left:	In Tolerance, No adjustment
Serial Number:	304001		
Procedure:	DS Eutechnics 4400-EP642		

Remarks:

NIST-traceable calibration performed on the unit referenced above in accordance with customer requirements, published specifications and the lab's standard operating procedures. No adjustments were made to the unit.

Standards Used

Standard ID	Manufacturer	Model Number	Description	Cal Date	Due Date
CP32033	Hart Scientific	5628	Temperature, Probe	7/25/2024	1/31/2026
CP32035	Hart Scientific	5628	Temperature, Probe	12/11/2024	6/30/2026
CP32036	Hart Scientific	5628	Temperature, Probe	4/09/2024	10/31/2025
CP32042	Hart Scientific	5680	Temperature, Probe, SPRT	3/25/2024	12/31/2025
CP371282	Fluke Corporation	1594A	Precision Readout	5/27/2022	3/31/2025

Calibration Data

Function Tested	Nominal / Reference Value	Measured Value	OOT	Calibration Tolerance g: = Guard Banding Applied	TUR	EMU
Temperature Accuracy	-15.000 °C					
As Found & As Left	-15.000	-14.96		-15.050 to -14.950 °C	3.3:1	± 0.015 °C
	0.000 °C					
As Found & As Left	0.000	0.01		-0.030 to 0.030 °C	2.3:1	± 0.013 °C
	75.000 °C					
As Found & As Left	75.000	74.99		74.970 to 75.030 °C	2.0:1	± 0.015 °C
	125.000 °C					
As Found & As Left	125.000	124.96		124.950 to 125.050 °C	3.0:1	± 0.016 °C

Temperature: 20 °C
Humidity: 27 %RH
Rpt. No.: 1777013

Calibration Performed By:		Quality Reviewer:	
Arnel Bautista	Technician, Metrology	James Alexander	2/24/2025

This report may not be reproduced, except in full, without written permission of Innocal. The results stated in this report relate only to the items tested or calibrated. Measurements reported herein are traceable to SI units via national standards maintained by NIST and were performed in compliance with MIL-STD-45662A, ANSI/NCSL Z540-1-1994, 10CFR60, Appendix B, ISO 9002-94, and ISO 17025:2017. Conformance based on Simple Acceptance as defined in ILAC G8 with a < 50% PFA. The estimated measurement uncertainty (EMU), if reported on this certificate, is being reported at a confidence level of 95% or K=2 unless otherwise noted in the remarks section.

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THE STANDARD IN PRECISION MEASUREMENT

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* 12-29-25

SERVICE AUTHORIZATION FORM
Highway Safety Technology Unit
80 South Swan Street
Albany, NY 12210
Ph: 518-485-7636 / 518-402-0689
Fax: 518-457-6869

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SECTION I - AGENCY INFORMATION

Name of Agency <i>Solvay PD</i>	Today's Date <i>12/29/25</i>
Address <i>507 Charles Ave</i>	City, State, ZIP <i>Solvay NY 13208</i>
Contact Person <i>Nick Eisenbeck</i>	Contact Telephone
Contact Email	Best Way to Reach You During Appointment Period

SECTION II - INSTRUMENT INFORMATION

Instrument Manufacturer (Please Circle) NPAS DMT <input checked="" type="checkbox"/> GUTH <input type="checkbox"/> Applied Concepts (Stalker) <input type="checkbox"/> Decatur (Genesis) <input type="checkbox"/> Kustom (Eagle/Falcon) <input type="checkbox"/> MPH <input type="checkbox"/> Alco-Sensor <input type="checkbox"/> Other:	
Model Number <i>12V500</i>	Instrument Serial Number <i>MP4078</i>
Antenna Serial Number (if applicable) Antenna 1 - <input type="checkbox"/> Antenna 2 - <input type="checkbox"/>	Type of maintenance (check appropriate) <input type="checkbox"/> Calibration Check <input type="checkbox"/> Repair
Brief Description of Malfunction	
List all parts, cables and/or accessories being submitted. Tuning forks must accompany all radar units (if applicable). (Please Circle)	
DMT/SIM: DMT SIM <input checked="" type="checkbox"/> Tubes Keyboard Other: <input checked="" type="checkbox"/> Communication cable <input checked="" type="checkbox"/> Power cable	Radar: Control Unit <input type="checkbox"/> Antenna(s) <input type="checkbox"/> Antenna Cable(s) Power Cord <input type="checkbox"/> Forks <input type="checkbox"/> Other:
I acknowledge I am signing this Service Authorization Form as an act and deed of said agency, organization, or municipality, and that I am duly authorized to sign same for the uses and purposes mentioned herein. PLEASE SIGN AND DATE.	
Signature <i>RL</i>	Date <i>12/29/25</i>

DCJS USE ONLY

Export °C <u>34.00</u>	Digital °C <u>34.02</u>	Thermometer: <u>304001</u>
34.00	<u>34.02</u>	Calibration Due: <u>2-24-26</u>
34.00	<u>34.02</u>	Air Leak Test: <u>OK</u> Propeller Rotation: <u>OK</u>
* <u>12-29-25</u>		