# VERIFICATION OF CALIBRATION REPORT

*of DataMaster cdm Breath Test Instrument*
*State of Alaska*
*Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program*

**DataMaster cdm S/N** 130112

Supervisor/Operator Performing the Verification Procedure:

A

Name Bruce Smith Jr ID# 3522 Date 10-14-08

Agency Wrangell Police Department Phone # (907) 874-3304

Instrument Location Wrangell Police Department, 431 Zimovia Highway

B

Alco S/N X 301583 Target Value .080 High Pressure 750

Alco Test Values .086 (1st Alco) .086 (2nd Alco)

Signature [signature] 10/28/08

(OVER)

(Do Not write in the area below)

Under the Alaska Rules of Evidence, I certify that;

(a) I am Jeanne Swartz, Forensic Scientist III, Scientific Crime Detection Laboratory, State of Alaska Department of Public Safety, and was, at the time of signing, the custodian of the records of the aforementioned laboratory and the signature was made in my official capacity as Scientific Director Designee of the State Breath Alcohol Testing Program.

(b) The verification of calibration for the above instrument has been received and reviewed. Instrument operator, Bruce W Smith, whose name appears in my records, is qualified to verify the calibration of the above instrument.

(c) This instrument is certified for evidentiary use and these records are being retained as original documents in my custody.

Signed and sealed,

[signature] 10/24/08

Jeanne Swartz Date
Scientific Director Designee
State of Alaska
State Breath Alcohol Testing Program

BT9 06/03

OCT 20 2008

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*of DataMaster cdm breath Test Instrument*
*State of Alaska*
*Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program*

**DataMaster cdm S/N** 130112

(CONTINUED FROM FRONT PAGE)

**C** TAPE THE TEST STRIP FROM THE NONDRINKING SUBJECT TEST AND THE DIAGNOSTIC CHECK IN THE MARKED BOXES.

NONDRINKING SUBJECT TEST

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130112

OCTOBER 14, 2008 CB 10/23/08

OPERATOR'S NAME:
SMITH JR, BRUCE W
OPERATOR'S NUMBER: 3522
SUBJECT'S LAST NAME:
VERIFICATION OF CAL
SUBJECT'S FIRST NAME/MI :
CAL
D.L. #: 012345
DEPT/AGENCY: WRG1
CASE/REPORT: 08100000
TEST TYPE: V
ALCO TARGET VALUE: .080
ALCO S/N: X301583

--- BREATH ANALYSIS ---

.080 ADJUSTED FOR 30.55 in

| | | |
|---|---|---|
| ALCO TARGET | .081 | 16:00 |
| BLANK TEST | .000 | 16:01 |
| INTERNAL STANDARD | VERIFIED | 16:01 |
| ALCO TV 30.55 in | .086 | 16:02 |
| BLANK TEST | .000 | 16:02 |
| SUBJECT SAMPLE | .000 CB 10/23/08 | 16:03 |
| BLANK TEST | .000 | 16:03 |
| ALCO TV 30.55 in | .086 | 16:04 |
| BLANK TEST | .000 | 16:05 |

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130112

OCTOBER 14, 2008
TIME 16:05

--- DIAGNOSTIC CHECK ---

| | |
|---|---|
| COMPUTER: | OKAY |
| PROGRAM: | OKAY |
| SOFTWARE DATE: | 02/20/01 |
| HEATERS | |
| SAMPLE CHAMBER: | 49c |
| BREATH TUBE: | 41c |
| BAROMETER: | 30.53 in |
| FLOW DETECTOR: | OKAY |
| PUMP | |
| HIGH SPEED: | OKAY |
| DETECTOR: | OKAY |
| FILTERS: | OKAY |
| QUARTZ STANDARD: | OKAY |
| CALIBRATION: | OKAY |

PRINTER TEST
!"#$%&'()*+,-./0123456789:;<=>?@ABCDEFG
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmno
pqrstuvwxyz{|}~