

# VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Supervisor/Operator Performing the Verification Procedure: DataMaster cdm S/N 130114 ✓

A Name Kevin Stevenson ID# 2414 Date 10-26-2008 *(initials)*

Agency UAA Police Dept Phone # 786 1120

Instrument Location UAA Police Dept ✓

B Alco S/N X301591 ✓ Target Value 1080 ✓ High Pressure 700 ✓

Alco Test Value Average .079 ✓ .079 ✓  
1<sup>st</sup> Alco 2<sup>nd</sup> Alco

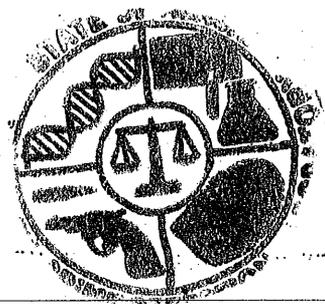
Signature *Kevin Stevenson* ✓

*CSB*  
*11/4/08*

(OVER)

Under the Alaska Rules of Evidence, I certify that;

- (a) I am <sup>(Do Not write in the area below)</sup> 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, Kevin Stevenson, 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,

*Jeanne Swartz* 11/5/08  
Date  
Jeanne Swartz  
Scientific Director Designee  
State of Alaska  
State Breath Alcohol Testing Program

OCT 30 2008  
379 9300

# 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 130114 ✓

(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 130114

OCTOBER 26, 2008

OPERATOR'S NAME: STEVENSON, KEVIN L.  
OPERATOR'S NUMBER: 2414  
SUBJECT'S LAST NAME: VERIFICATION  
SUBJECT'S FIRST NAME/MI: VERIFICATION  
O.L. #: 123  
DEPT/AGENCY: ANCF  
CASE/REPORT: 09009  
TEST TYPE: U  
ALCO TARGET VALUE: .000 ✓  
ALCO S/N: X301591 ✓

### BREATH ANALYSIS

.000 ADJUSTED FOR 29.91 in  
ALCO TARGET .079 12:36  
BLANK TEST .000 12:37  
INTERNAL STANDARD VERIFIED 12:37  
ALCO TU 29.91 in .079 ✓ 12:38  
BLANK TEST .000 12:39  
SUBJECT SAMPLE .000 12:39  
BLANK TEST .000 12:40  
ALCO TU 29.91 in .079 12:40  
BLANK TEST .000 12:41

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130114

OCTOBER 26, 2008  
TIME 12:33

### DIAGNOSTIC CHECK

COMPUTER: OKAY  
PROGRAM: OKAY  
SOFTWARE DATE: 02/20/01  
HEATERS  
SAMPLE CHAMBER: 49c  
BREATH TUBE: 42c  
BAROMETER: 29.91 in  
FLOW DETECTOR: OKAY  
PUMP  
HIGH SPEED: OKAY  
DETECTOR: OKAY  
FILTERS: OKAY  
QUARTZ STANDARD: OKAY  
CALIBRATION: OKAY

### PRINTER TEST

!\*"#&'()\*+,-./0123456789:;<=>?@ABCDEF  
GHIJKLMNOPQRSTUVWXYZ[\]^\_`abcde fghi jklmno  
pqrstuvwxy z{|}~