

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

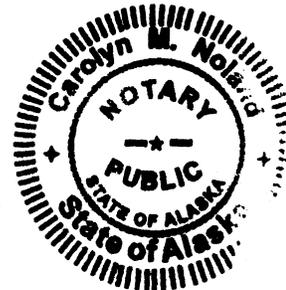
Supervisor/Operator Performing the Verification Procedure:	
DataMaster cdm S/N <u>130117</u>	
Name <u>KYLE VALERIO</u> ID# <u>2093</u> Date <u>4-1-2009</u>	
A	Agency <u>KODIAK POLICE DEPARTMENT</u> Phone # <u>(907)486-8000</u>
Instrument Location <u>217 LOWER MILL BAY ROAD, KODIAK, AK. 99615</u>	
Alco S/N <u>X172991</u> Target Value <u>.078</u> High Pressure <u>850</u>	
B	Alco Test Values
	<u>.077</u> <u>.075</u>
	1 st Alco 2 nd Alco
Signature <u>[Handwritten Signature]</u> CMB 5/13/09	
(OVER)	

I, Nita J. Bolz, 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, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
- (5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.

Nita J. Bolz
Nita J. Bolz
Scientific Director
State Breath Alcohol Program

Subscribed and sworn before me this 22 day of May, 2009.
[Handwritten Signature] (Notary Seal Stamp)
Carolyn M. Noland
Notary Public, State of Alaska
Commission Expires with Office



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 130117

(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 130117

APRIL 01, 2009

OPERATOR'S NAME: *COB 5/13/09*
VALERIO, KYLE D
OPERATOR'S NUMBER: 2093
SUBJECT'S LAST NAME:
VERIFICATION OF CAL
SUBJECT'S FIRST NAME/NI :
TEST

O.L. #: XXXXXX
DEPT/AGENCY: KOD1
CASE/REPORT: 200900000
TEST TYPE: V
ALCO TARGET VALUE: .078
ALCO S/N: X172991

--- BREATH ANALYSIS ---

.078 ADJUSTED FOR 30.29 in		
ALCO TARGET	.078	13:12
BLANK TEST	.000	13:13
INTERNAL STANDARD	VERIFIED	13:13
ALCO TV 30.29 in	.077	13:14
BLANK TEST	.000	13:15
SUBJECT SAMPLE	.000	13:15
BLANK TEST	.000	13:16
ALCO TV 30.30 in	.075	13:16
BLANK TEST	.000	13:17

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130117

APRIL 01, 2009
TIME 13:17

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM: OKAY
SOFTWARE DATE: 02/20/01
HEATERS
SAMPLE CHAMBER: 49c
BREATH TUBE: 42c
BAROMETER: 30.30 in
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

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