

# 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>130128</u> ✓
Name	<u>Byron D. Redburn</u>	ID# <u>2087</u> Date <u>3-6-08</u> ✓
Agency	<u>Nome Police Dept</u>	Phone # <u>443-5262</u>
Instrument Location	<u>Nome Police Dept</u>	
Alco S/N	<u>X124646</u> ✓	Target Value <u>.080</u> ✓ High Pressure <u>600</u>
Alco Test Values	<u>.081</u> 1 <sup>st</sup> Alco	<u>.081</u> 2 <sup>nd</sup> Alco
Signature	<u>[Signature]</u>	

(OVER) COB 3/11/08

(Do Not write in the area below)

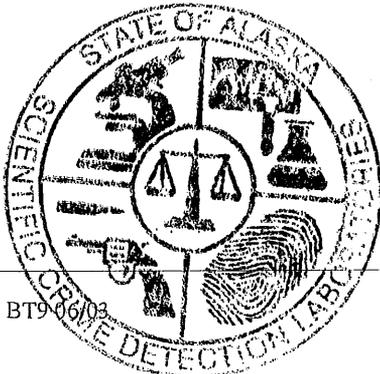
Under the Alaska Rules of Evidence, I certify that;

(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, Byron D Redburn, 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,



BT9-06/03

[Signature]

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

3/12/08  
Date

# 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 130128

(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 130128

MARCH 06, 2008

OPERATOR'S NAME:

REDBURN BYRON D

OPERATOR'S NUMBER: 2987

SUBJECT'S LAST NAME:

VERIFICATION OF CAL

SUBJECT'S FIRST NAME/MI :

A

O.L. #: A

DEPT/AGENCY: OME1

CASE/REPORT: A

TEST TYPE: U

ALCO TARGET VALUE: .000

ALCO S/N: X124646

--- BREATH ANALYSIS ---

.000 ADJUSTED FOR 29.36 in  
ALCO TARGET .078 05:04  
BLANK TEST .000 05:05  
INTERNAL STANDARD VERIFIED 05:05  
ALCO TU 29.36 in .081 05:05  
BLANK TEST .000 05:06  
SUBJECT SAMPLE .000 05:07  
BLANK TEST .000 05:07  
ALCO TU 29.36 in .081 05:08  
BLANK TEST .000 05:09

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130128

MARCH 06, 2008

TIME 05:11

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY  
PROGRAM: OKAY  
SOFTWARE DATE: 02/20/01  
HEATERS  
SAMPLE CHAMBER: 49c  
BREATH TUBE: 41c  
BAROMETER: 29.36 in  
FLOW DETECTOR: OKAY  
PUMP  
HIGH SPEED: OKAY  
DETECTOR: OKAY  
FILTERS: OKAY  
QUARTZ STANDARD: OKAY  
CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEFGHIJ  
KLMNOPQRSTUVWXYZ[\]^\_`abcdefghijklmnop  
qrstuvwxy{|}~