

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	130130 ✓				
Name	Robert Gibbs	ID#	3006	Date	9-30-08 ✓		
A	Agency	Valdez PD	Phone #	835 4560			
	Instrument Location	Valdez Alaska ✓					
B		Alco S/N	70108 ✓	Target Value	.083 ✓	High Pressure	1100 ✓
	Alco Test Values	.079 ✓	.079 ✓	1 st Alco	2 nd Alco		
Signature	Robert T. Gibbs						CSB 10/23/08

(OVER)

Under the Alaska Rules of Evidence, I certify that;
(Do Not write in the area below)

(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, Robert T Gibbs, 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

Scientific Director Designee
State of Alaska
State Breath Alcohol Testing Program

10/24/08
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 130130 ✓

(CONTINUED FROM FRONT PAGE)

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

DIAGNOSTIC CHECK

NONDRINKING SUBJECT TEST

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130130

SEPTEMBER 30, 2008

OPERATOR'S NAME:

GIBBS/ROBERT/T

OPERATOR'S NUMBER: 0000
SUBJECT'S LAST NAME:
SUBJECT'S LAST INITIAL:

VERIFICATION OF CAL
SUBJECT'S FIRST NAME/MI:

TT
O.L. #: D
DEPT/AGENCY: UDZ1
CASE/REPORT: U

TEST TYPE: U
ALCO TARGET VALUE: .083 ✓
ALCO S/N: 78108 ✓

--- BREATH ANALYSIS ---

.083 ADJUSTED FOR 29.81 in
ALCO TARGET .082 12:23
BLANK TEST .000 12:24
INTERNAL STANDARD VERIFIED 12:24
ALCO TU 29.81 in .079 ✓ 12:24
BLANK TEST .000 12:25
SUBJECT SAMPLE .000 ✓ 12:26
BLANK TEST .000 ✓ 12:26
ALCO TU 29.81 in .079 ✓ 12:27
BLANK TEST .000 12:28

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130130

SEPTEMBER 30, 2008 ✓
TIME 12:17

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM: OKAY
SOFTWARE DATE: 02/20/01
HEATERS
SAMPLE CHAMBER: 49c
BREATH TUBE: 40c
BAROMETER: 29.81 in
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

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