

# 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>130132</u> ✓
Name <u>Matthew E. Armstrong</u>	ID# <u>MEAO</u> <sup>5906</sup> <sub>12-8-08</sub>	Date <u>5 Dec 08</u> ✓
A Agency <u>Seward PD</u>	Phone # <u>(907) 224-3338</u> ✓	
Instrument Location <u>410 Adams St Seward Community Jail, Seward AK</u>		
B Alco S/N <u>X124662</u> ✓ Target Value <u>.079</u> ✓ High Pressure <u>650</u>		
Alco Test Values	<u>.079</u> ✓ 1 <sup>st</sup> Alco	<u>.079</u> ✓ 2 <sup>nd</sup> Alco
Signature <u>Matthew E. Armstrong</u> ✓	<u>CSB</u> 12/10/08	
(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, Matthew E Armstrong, 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 12/10/08  
Jeanne Swartz Date  
Scientific Director Designee  
State of Alaska  
State Breath Alcohol Testing Program

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DataMaster cdm S/N 130132 ✓

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**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 130132

DECEMBER 05, 2000 ✓ *CAB 12/05/00*

OPERATOR'S NAME:  
ARMSTRONG, MATTHEW E  
OPERATOR'S NUMBER: 5906  
SUBJECT'S LAST NAME:  
UUC  
SUBJECT'S FIRST NAME/MI :  
TEST

O.L. #: 0000000  
DEPT/AGENCY: SUD1  
CASE/REPORT: 00000  
TEST TYPE: T  
ALCO TARGET VALUE: .079 ✓  
ALCO S/N: X124662 ✓

--- BREATH ANALYSIS ---

.079 ADJUSTED FOR 29.00 in		
ALCO TARGET	.078	06:45
BLANK TEST	.000	06:46
INTERNAL STANDARD	VERIFIED	06:46
ALCO TV 29.00 in	.079	06:46
BLANK TEST	.000	06:47
SUBJECT SAMPLE	.000	06:48
BLANK TEST	.000	06:48
ALCO TV 29.00 in	.079	06:49
BLANK TEST	.000	06:50

*CAB 12/05/00*

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130132

DECEMBER 05, 2000 ✓  
TIME 06:42

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM:	OKAY
SOFTWARE DATE:	03/29/00
HEATERS	
SAMPLE CHAMBER:	48c
BREATH TUBE:	44c
BAROMETER:	29.00 in
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY <i>(P)</i>
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST

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H I J K L M N O P Q R S T U V W X Y Z [ \ ] ^ \_ ` a b c d e f g h i j k l m n o  
p q r s t u v w x y z 1 2 3 4 5 6 7 8 9 0