

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 130174

Name Kevin Stevenson ID# 2414 Date 07.11.08 ✓

A Agency UAA Police Dept Phone # 907.786.1120

Instrument Location UAA Police Dept (DUI Processing Room) ✓

B Alco S/N X301591 ✓ Target Value .080 ✓ High Pressure 100°

Alco Test Value Average .079 ✓ .079 ✓
1st Alco 2nd Alco

Signature [Handwritten Signature] COB
7/22/08

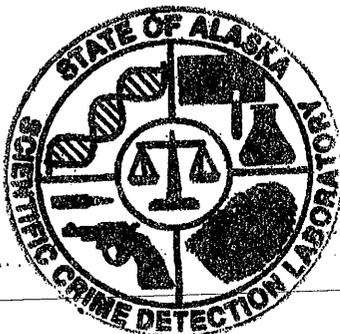
Under the Alaska Rules of Evidence, I certify that, (OVER)

(a) I am Jeanne Swartz, Forensic Scientist, 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,



[Handwritten Signature]

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

7/22/08
Date

JUL 14 2008

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 130 174 ✓

(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 130174

JULY 11, 2008 *12/08*

OPERATOR'S NAME:
STEVENS ON KEVIN L
OPERATOR'S NUMBER: 2414
SUBJECT'S LAST NAME:
VERIFICATION
SUBJECT'S FIRST NAME/MI:
VERIFICATION
O.L. #: 1234
DEPT/AGENCY: ANCF
CASE/REPORT: 080765
TEST TYPE: U
ALCO TARGET VALUE: .080 ✓
ALCO S/N: X301591 ✓

— BREATH ANALYSIS —

.080 ADJUSTED FOR 30.27 in		
ALCO TARGET	.080	02:02
BLANK TEST	.000	02:03
INTERNAL STANDARD	VERIFIED	02:03
ALCO TV 30.27 in	.079 ✓	02:03
BLANK TEST	.000	02:04
SUBJECT SAMPLE	.080 <i>08/08</i>	02:05
BLANK TEST	.000	02:05
ALCO TV 30.27 in	.079	02:06
BLANK TEST	.000	02:07

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130174

JULY 11, 2008
TIME: 02:00

— DIAGNOSTIC CHECK —

COMPUTER: OKAY

PROGRAM: OKAY

SOFTWARE DATE: 02/20/01

HEATERS:
SAMPLE CHAMBER: 49c
BREATH TUBE: 41c

BAROMETER: 30.27 in

FLOW DETECTOR: OKAY

PUMP
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST
!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEFGHI
HIJKL MNOPQRSTUVWXYZ \] ^ _ ` abcdefghijklmno
pqrstuvwxy{|}~

08/08