

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>130182</u> ✓
Name	<u>TIM TUCKWOOD</u>	ID#	<u>3446</u> Date <u>7-7-08</u>
A Agency	<u>Alaska State Troopers</u>	Phone #	<u>895-4800</u>
Instrument Location		<u>Delta Court</u>	
Alco S/N		Target Value	High Pressure
<u>X124650</u> ✓		<u>.080</u> ✓	<u>0</u>
Alco Test Value Average		1 st Alco 2 nd Alco	
<u>.076</u> ✓		<u>.076</u> ✓	
Signature		<u>Tim Tuckwood</u>	
		<u>CS</u> <u>7/10/08</u>	

(OVER)

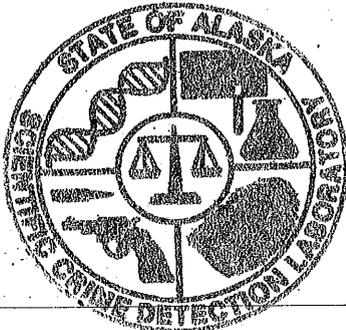
Under the Alaska Rules of Evidence, I certify that,

(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, Tim Tuckwood, 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

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

7/15/08
Date

JUL 10 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 130182

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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 130182

JULY 07, 2008

OPERATOR'S NAME: TUCKWOOD TIM
OPERATOR'S NUMBER: 3446
SUBJECT'S LAST NAME: VERIF

SUBJECT'S FIRST NAME/NI : OF CAL

O.L. #: 12345
DEPT/AGENCY: DJT0
CASE/REPORT: 09876
TEST TYPE: U
ALCO TARGET VALUE: .000 ✓
ALCO S/N: K124650 ✓

— BREATH ANALYSIS —

.000 ADJUSTED FOR 28.76 in
ALCO TARGET .076 14:48
BLANK TEST .000 14:48
INTERNAL STANDARD VERIFIED 14:49
ALCO TV 28.74 in .076 14:49
BLANK TEST .000 14:50
SUBJECT SAMPLE .000 14:50
BLANK TEST .000 14:51
ALCO TV 28.74 in .076 14:51
BLANK TEST .000 14:52

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130182

JULY 07, 2008 ✓
TIME 14:45

— DIAGNOSTIC CHECK —

COMPUTER: OKAY
PROGRAM: OKAY
SOFTWARE DATE: 02/20/01
HEATERS
SAMPLE CHAMBER: 49c
BREATH TUBE: 41c
BAROMETER: 28.76 in
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEF6
HIJKLMNPOQRSTUVWXYZ[\]^_`abcde fghijklmno
pqrstuvwxyz{|}~■