

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>130185</u>	
Name <u>STEVE CHRISTENSEN</u>	ID# <u>1315</u> Date <u>2/28/08</u>
Agency <u>JUNEAU POLICE DEPT</u>	Phone # <u>907-586-0600</u>
Instrument Location <u>JUNEAU POLICE DEPT</u>	
Alco S/N <u>X124627</u> Target Value <u>.081</u> High Pressure <u>1100</u>	
Alco Test Values <u>.080</u> 1 st Alco <u>.081</u> 2 nd Alco	
Signature <u>[Signature]</u> <u>3/10/08</u>	

(OVER)

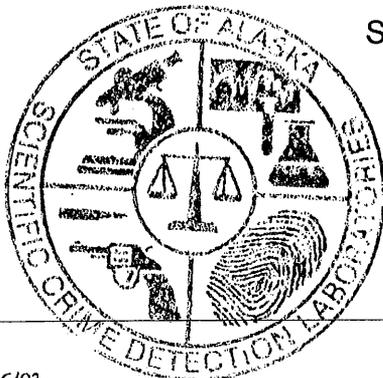
(Do Not write in the area below)

Under the Alaska Rules of Evidence, I certify that;

(a) I am Jeanne Swartz, Criminalist 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, Steve Christensen, 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,

[Signature]

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

03/10/08
Date

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm breath Test Instrument

State of Alaska

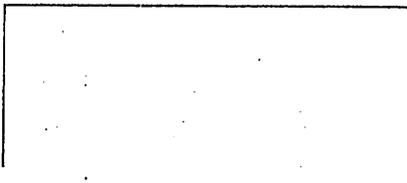
Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N 130185

(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 130185

FEBRUARY 28, 2008

OPERATOR'S NAME:

CHRISTENSEN, S, E

OPERATOR'S NUMBER: 1315

SUBJECT'S LAST NAME:

VERIFICATION OF CAL

SUBJECT'S FIRST NAME/MI :
VOC

O.L. #: 022808

DEPT/AGENCY: JNU1

CASE/REPORT: 022808

TEST TYPE: V

ALCO TARGET VALUE: .081

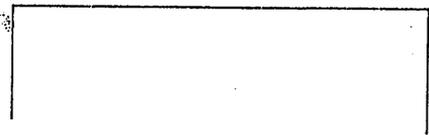
ALCO S/N: X124627 ✓

--- BREATH ANALYSIS ---

.081 ADJUSTED FOR 29.88 in
ALCO TARGET .080 21:57
BLANK TEST .000 21:58
INTERNAL STANDARD VERIFIED 21:58
ALCO TV 29.88 in .081 21:58
BLANK TEST .000 21:59
SUBJECT SAMPLE .000 22:00
BLANK TEST .000 22:00
ALCO TV 29.88 in .081 22:01
BLANK TEST .000 22:02



DIAGNOSTIC CHECK



ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130185

FEBRUARY 28, 2008

TIME 22:03

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM: OKAY
SOFTWARE DATE: 02/20/01
HEATERS
SAMPLE CHAMBER: 49c
BREATH TUBE: 42c
BAROMETER: 29.88 in
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

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

