

# 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 130188 ✓

Supervisor/Operator Performing the Verification Procedure:

Name V. Eugene Fowler ID# 4386 ✓ Date 3/10/11 ✓

A Agency Alaska State Troopers Phone # 262-4453

Instrument Location Anchor Point Post

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B Alco S/N X124635 ✓ Target Value .080 ✓ High Pressure 1000

Alco Test Values .084 ✓ .084 ✓

1<sup>st</sup> Alco 2<sup>nd</sup> Alco

Signature V. E. Fowler

(OVER)

*Handwritten initials and date:* BMB 3/10/11

I, Nita J. Bolz, after being first duly sworn, depose and state as follows (do not write in the area below)

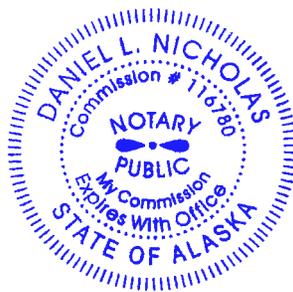
- (1) I am a Forensic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.
- (2) The Alaska Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.
- (3) I am the Scientific Director of the State Breath Alcohol Program.
- (4) In that capacity, I am responsible for overseeing the breath alcohol program, including assuring that persons responsible for verifying the calibration of instruments are properly trained and qualified. I also am responsible for maintaining the records of the program.
- (5) The attached verification is a true and accurate verification of calibration that reflects a regularly conducted and regularly recorded activity of the breath alcohol program performed by a person trained and qualified to conduct the verification.
- (6) The referenced instrument is certified for evidentiary use in the State of Alaska.

Nita J. Bolz  
 Nita J. Bolz  
 Scientific Director  
 State Breath Alcohol Program

Subscribed and sworn before me this 31 day of MAR, 2011

[Signature] (Notary Seal Stamp)

Daniel L. Nicholas  
Notary Public, State of Alaska  
Commission Expires with Office



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(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 130188

MARCH 10, 2011

OPERATOR'S NAME: FOWLER/D/E  
OPERATOR'S NUMBER: 4386  
SUBJECT'S LAST NAME: UOC  
SUBJECT'S FIRST NAME/MI: UOC  
O.L. #: UOC  
DEPT/AGENCY: SLT5  
CASE/REPORT: UOC  
TEST TYPE: U  
ALCO TARGET VALUE: .000  
ALCO S/N: X124635

*BMB 3/31/11*

— BREATH ANALYSIS —

.000 ADJUSTED FOR 29.93 in		
ALCO TARGET	.000	17:16
BLANK TEST	.000	17:17
INTERNAL STANDARD	VERIFIED	17:17
ALCO TV 29.93 in	.004	17:18
BLANK TEST	.000	17:19
SUBJECT SAMPLE	.000	17:19
BLANK TEST	.000	17:20
ALCO TV 29.93 in	.004	17:21
BLANK TEST	.000	17:22

*BMB 3/31/11*

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130188

MARCH 10, 2011  
TIME 17:13

— DIAGNOSTIC CHECK —

COMPUTER:	OKAY
PROGRAM:	OKAY
SOFTWARE DATE:	02/20/01
HEATERS	
SAMPLE CHAMBER:	49c
BREATH TUBE:	42c
BAROMETER:	29.93 in
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST  
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