

VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument
State of Alaska

JAN 22 2010

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Supervisor/Operator Performing the Verification Procedure:		DataMaster cdm S/N	130190
Name		Bill J. Ferris	ID# 5004 Date 01/13/10
A	Agency	Togiak Police Department	Phone # 493-5212
Instrument Location		Togiak P.D. 100 main Street	
Alco S/N		57023	Target Value .081 High Pressure 100 psi.
B	Alco Test Values	.084	1 st Alco 2 nd Alco .083
Signature		<i>William J Ferris</i> 01/20/10	
(OVER)			

(Do Not write in the area below)

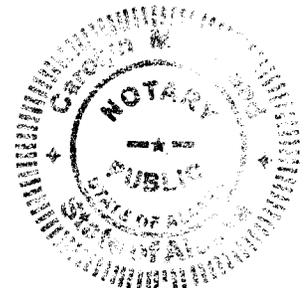
I, Nita J. Bolz, after being first duly sworn, depose and state as follows:

- (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 20th day of January 2010.

Carolyn M. Noland
(Notary Seal Stamp)
Carolyn M. Noland
Notary Public, State of Alaska
Commission Expires with Office



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 130190 ✓

(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 130190 ✓

JANUARY 13, 2010

OPERATOR'S NAME: *CBS 1/20/10*
FERRIS BILL J

OPERATOR'S NUMBER: 5004

SUBJECT'S LAST NAME:
UOC

SUBJECT'S FIRST NAME/MI :
XXXXX

O.L. #: XXXXXXX

DEPT/AGENCY: T061

CASE/REPORT: XX-XXX-XX

TEST TYPE: V ✓

ALCO TARGET VALUE: 001 ✓

ALCO S/N: 57023 ✓

— BREATH ANALYSIS —

.081 ADJUSTED FOR 29.81 in		
ALCO TARGET	.000	16:56
BLANK TEST	.000	16:57
INTERNAL STANDARD	VERIFIED	16:57
ALCO TV 29.81 in	.084 ✓	16:57
BLANK TEST	.000	16:58
SUBJECT SAMPLE <i>CBS 1/20/10</i>	.000	16:59
BLANK TEST	.000	16:59
ALCO TV 29.81 in	.083 ✓	17:00
BLANK TEST	.000	17:00

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130190 ✓

JANUARY 13, 2010 ✓
TIME 16:53

— DIAGNOSTIC CHECK —

COMPUTER:	OKAY
PROGRAM:	OKAY
SOFTWARE DATE:	01/08/09
HEATERS	
SAMPLE CHAMBER:	49c
BREATH TUBE:	41c
BAROMETER:	29.81 in
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
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 { | } ~ ¡ ¢