

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	130190 ✓		
Name	C. RITALA / 1349	ID#	3791	Date	8/10/08 ✓
A Agency	APD ✓	Phone #	786 2640		
Instrument Location	Anchorage Jail				
B Alco S/N	X301554 ✓	Target Value	.075 ✓	High Pressure	1100
Alco Test Values	.076 ✓ 1 st Alco	.076 ✓ 2 nd Alco			
Signature		Ritala/1349			8/18/08

(OVER)

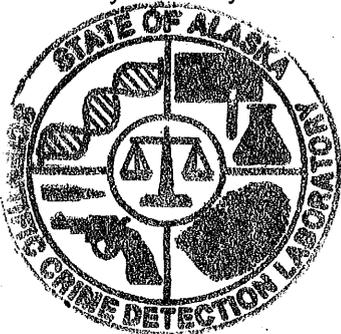
Under the Alaska Rules of Evidence, I certify that;

(Do Not write in the area below)

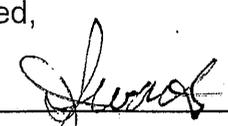
(a) I am Jeanne Swartz, Forensic Scientist III, Scientific Crime Detection Laboratory, State of Alaska Department of Public Safety, and was, at the time of signing, the custodian of the records of the aforementioned laboratory and the signature was made in my official capacity as Scientific Director Designee of the State Breath Alcohol Testing Program.

(b) The verification of calibration for the above instrument has been received and reviewed. Instrument operator, Chris Ritala, 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,

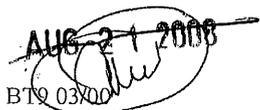


Jeanne Swartz
Scientific Director Designee
State of Alaska
State Breath Alcohol Testing Program

8/21/08

Date

AUG 11 2008


B79 03700

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

AUGUST 10, 2008 ✓ *8/18/08*

OPERATOR'S NAME:

RITALA

OPERATOR'S NUMBER: 3791

SUBJECT'S LAST NAME:

VERIFICATION OF CALIBRATION

SUBJECT'S FIRST NAME/MI :

A

O.L. #: A

DEPT/AGENCY: ANCI

CASE/REPORT: A

TEST TYPE: U

ALCO TARGET VALUE: .075 ✓

ALCO S/N: X301554 ✓

--- BREATH ANALYSIS ---

.075 ADJUSTED FOR 30.07 in
ALCO TARGET .075 00:42
BLANK TEST .000 00:43
INTERNAL STANDARD VERIFIED 00:43
ALCO TV 30.07 in .076 ✓ 00:44
BLANK TEST .000 00:44
SUBJECT SAMPLE .000 *8/18/08* 00:45
BLANK TEST .000 *8/18/08* 00:46
ALCO TV 30.07 in .076 ✓ 00:46
BLANK TEST .000 00:47

8/18/08

8/18/08

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130190

AUGUST 10, 2008 ✓

TIME 00:48

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM: OKAY

SOFTWARE DATE: 02/20/01

HEATERS

SAMPLE CHAMBER: 49c

BREATH TUBE: 41c

BAROMETER: 30.07 in

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

!@#%&'()*+,-./0123456789:;<=>?@ABCDEF
GHIJKLMNOPQRSTUVWXYZ[\]^_`ab cde fgh i jk lmn
opq rstuvwxyz{|}~■

8/18/08

8/18/08