

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	130194 ✓			
Name	Lucas P Amidon	ID#	5651	Date	3/1/08 ✓	
A	Agency	North Slope Borough PD	Phone #	907 852 6111		
Instrument Location		Barrow				
Alco S/N		X172978 ✓	Target Value	.083 ✓	High Pressure	500
B		Alco Test Values	.086	.086		
		1 st Alco		2 nd Alco		
Signature		Lucas P Amidon		COP 3/6/08		

(OVER)

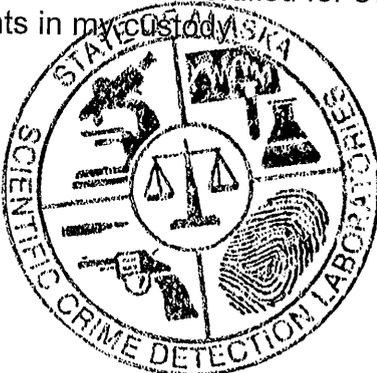
(Do Not write in the area below)

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, Lucas Amidon, 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

3/6/08

Date

