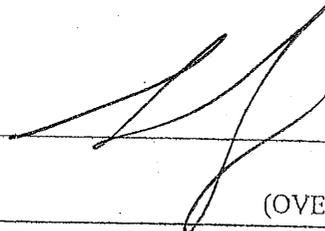


# VERIFICATION OF CALIBRATION REPORT

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>130291</u> ✓
Name	<u>Sean Fielding</u>	ID#	<u>5789</u> Date <u>8/5/08</u>
A	Agency	<u>Denali National Park</u>	Phone # <u>683 9528</u>
	Instrument Location	<u>Denali National Park - HQ</u>	✓
B	Alco S/N	<u>78259</u> ✓	Target Value <u>.086</u> ✓ High Pressure <u>50</u>
	Alco Test Value Average	<u>.085</u> ✓	<u>.085</u> ✓
		1 <sup>st</sup> Alco	2 <sup>nd</sup> Alco
	Signature		
		(OVER)	<u>CS</u> <u>8/12/08</u>

(Do Not write in the area below)

Under the Alaska Rules of Evidence, I certify that;

(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, Sean Fielding, 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

8/13/08

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 130291 ✓

(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 130291

AUGUST 05, 2000

OPERATOR'S NAME:  
FIELDING/SEAN/R  
OPERATOR'S NUMBER: 5189  
SUBJECT'S LAST NAME:  
VERIFICATION OF CAL  
SUBJECT'S FIRST NAME/MI:

A  
O.L. #: 1234567  
DEPT/AGENCY: DNL8  
CASE/REPORT: 884508  
TEST TYPE: V  
ALCO TARGET VALUE: .086 ✓  
ALCO S/N: 78259 ✓

--- BREATH ANALYSIS ---

.086 ADJUSTED FOR 28.22 in

ALCO TARGET	.081	16:22
BLANK TEST	.000	16:23
INTERNAL STANDARD	VERIFIED	16:23
ALCO TU 28.22 in	.085 ✓	16:23
BLANK TEST	.000	16:24
SUBJECT SAMPLE	.090 ✓	16:25
BLANK TEST	.000	16:26
ALCO TU 28.22 in	.085 ✓	16:26
BLANK TEST	.000	16:27

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130291

AUGUST 05, 2000 ✓  
TIME 16:28

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY  
PROGRAM: OKAY  
SOFTWARE DATE: 02/26/01  
HEATERS  
SAMPLE CHAMBER: 49c  
BREATH TUBE: 41c  
BAROMETER: 28.22 in  
FLOW DETECTOR: OKAY  
PUMP  
HIGH SPEED: OKAY  
DETECTOR: OKAY  
FILTERS: OKAY  
QUARTZ STANDARD: OKAY  
CALIBRATION: OKAY

PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEF  
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pqrstuvwxyz{|}~