

# VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

SEP 10 2009

Supervisor/Operator Performing the Verification Procedure: DataMaster cdm S/N 130292

Name J Swartz ID# 4314 Date 9/2/09

A Agency SCDL Phone # 269-5392

Instrument Location SCDL

B Alco S/N SCOTT08 Target Value .080 High Pressure 800psi

Alco Test Values .080 .080  
1<sup>st</sup> Alco 2<sup>nd</sup> Alco

Signature [Signature]

(OVER)

*[Handwritten: 8MB 9/9/09]*

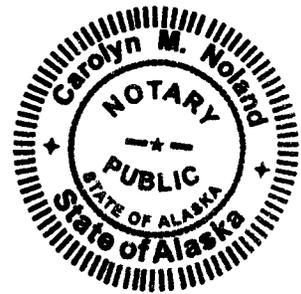
(Do Not write in the area below)

- 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.

[Signature]  
Nita J. Bolz  
Scientific Director  
State Breath Alcohol Program

Subscribed and sworn before me this 29<sup>th</sup> day of Sept, 2009.

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



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of DataMaster cdm breath Test Instrument

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DataMaster cdm S/N 130292

(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 130292

APRIL 02, 2009

OPERATOR'S NAME:  
SWARTZ/J

OPERATOR'S NUMBER: 4314

SUBJECT'S LAST NAME:

VERIFICATION OF CAL

SUBJECT'S FIRST NAME/MI:

L

O.I.L. #: L

DEPT/AGENCY: AAA1

CASE/REPORT:

TEST TYPE: U

ALCO TARGET VALUE: .000

ALCO S/N: SCOTT08

--- BREATH ANALYSIS ---

.000 ADJUSTED FOR 29.98 in

ALCO TARGET	.000	14:19
BLANK TEST	.000	14:20
INTERNAL STANDARD	VERIFIED	14:20
ALCO TU 29.99 in	.000	14:21
BLANK TEST	.000	14:22
SUBJECT SAMPLE	.000	14:22
BLANK TEST	.000	14:23
ALCO TU 29.98 in	.000	14:24
BLANK TEST	.000	14:24

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130292

APRIL 02, 2009  
TIME 14:16

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM:	OKAY
SOFTWARE DATE:	02/20/01
HEATERS	
SAMPLE CHAMBER:	48c
BREATH TUBE:	43c
BAROMETER:	29.98 in
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST

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