

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 <u>130295</u>
Name <u>J Swartz</u>		ID# <u>4314</u> Date <u>4/13/09</u>
A	Agency <u>SCDL</u>	Phone # <u>269-5592</u>
Instrument Location <u>SCDL</u>		
Alco S/N <u>SC07108</u>		Target Value <u>.080</u> High Pressure <u>800 psi</u>
B	Alco Test Values	
	1 st Alco <u>.081</u>	2 nd Alco <u>.081</u>
Signature <u>[Signature]</u>		
(OVER)		

BMB
9/10/09

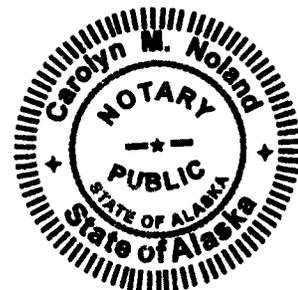
I, Nita J. Bolz, after being first duly sworn, depose and state as follows. (Do Not write in the area below)

- (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 29th day of Sept., 2009.

[Signature] (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 130295 ✓

(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 130295

APRIL 13, 2009

OPERATOR'S NAME:
SWARTZ/J
OPERATOR'S NUMBER: 4314
SUBJECT'S LAST NAME:
VERIFICATION OF CAL
SUBJECT'S FIRST NAME/MI :

L
O.L. #: L
DEPT/AGENCY: AA01
CASE/REPORT:
TEST TYPE: U
ALCO TARGET VALUE: .000
ALCO S/N: SCOTT08

--- BREATH ANALYSIS ---

.000 ADJUSTED FOR 30.03 in
ALCO TARGET .000 06:28
BLANK TEST .000 06:28
INTERNAL STANDARD VERIFIED 06:28
ALCO TU 30.03 in .001 06:29
BLANK TEST .000 06:30
SUBJECT SAMPLE .000 06:30
BLANK TEST .000 06:31
ALCO TU 30.03 in .001 06:31
BLANK TEST .000 06:32

8 4/13/09

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130295

APRIL 13, 2009 ✓
TIME 06:26

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM: OKAY
SOFTWARE DATE: 01/08/09
HEATERS
SAMPLE CHAMBER: 49c
BREATH TUBE: 40c
BAROMETER: 30.03 in
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

!@#%&'()*+,-./0123456789:;<=>?@BCDEFG
HIJKLmnopqrstuvwxyz[\]^_`abcde fghi.jklmno
pqrstuvwxy z{|}~