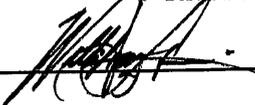


VERIFICATION OF CALIBRATION REPORT

Of DataMaster cdm BreathTest Instrument

State of Alaska

Scientific Crime Detection Laboratory -- Statewide Breath Alcohol Program

Supervisor/Operator Performing the Verification Procedure:		DataMaster cdm S/N	<u>130296</u> ✓
Name <u>William Simms</u>		ID#	<u>5214</u>
		Date	<u>FEB 05, 2009</u> ✓
A.	Agency	<u>Unalaska Department of Public Safety</u>	Phone <u>907-581-1233</u>
Instrument Location <u>Unalaska Department of Public Safety, 29 Safety Way, Unalaska, Alaska, 99685</u> ✓			
Alco S/N		<u>X172985</u> ✓	Target Value <u>.083</u> ✓
			High Pressure <u>1000</u>
B.	Alco Test Values	<u>.083</u> ✓ 1 st Test Value	<u>.083</u> ✓ 2 nd Test Value
Signature		 ✓	<u>CSB</u> <u>2/9/09</u>
(OVER)			

(Do not write in the area below)

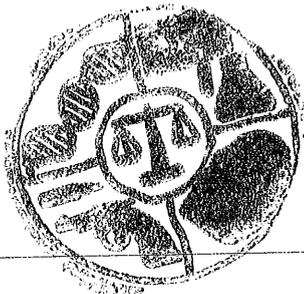
Under the Alaska Rules of Evidence, I certify that;

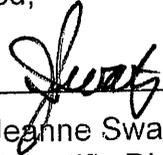
(a) I am Jeanne Swartz, Forensic Scientist III, Scientific Crime Detection Laboratory, State of Alaska Department of Public Safety, and was, at the time of signing, the custodian of the records of the aforementioned laboratory and the signature was made in my official capacity as Scientific Director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

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

2/9/09

Date

VERIFICATION OF CALIBRATION REPORT

Of DataMaster cdm BreathTest Instrument

State of Alaska

Scientific Crime Detection Laboratory -- Statewide Breath Alcohol Program

DataMaster cdm S/N 130296

Supervisor/Operator & Number Performing the Verification Procedure: William Simms ID# 5214
Department and Date: Unalaska DPS, 02/05/09

(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 130296

FEBRUARY 05, 2009 ✓
CSB
2/9/09

OPERATOR'S NAME:
SIMMS/WILLIAM/D
OPERATOR'S NUMBER: 5214
SUBJECT'S LAST NAME:
VER OF CAL
SUBJECT'S FIRST NAME/MI :
VER OF CAL
D.L. #: VOC
DEPT/AGENCY: UNK1
CASE/REPORT: VOC
TEST TYPE: U
ALCO TARGET VALUE: .083 ✓
ALCO S/N: X172985

--- BREATH ANALYSIS ---

.083 ADJUSTED FOR 29.57 in		
ALCO TARGET	.082	08:44
BLANK TEST	.000	08:45
INTERNAL STANDARD	VERIFIED	08:45
ALCO TV 29.57 in	.083 ✓	08:46
BLANK TEST	.000	08:47
SUBJECT SAMPLE	.000	08:47
BLANK TEST	.000	08:48
ALCO TV 29.57 in	.083 ✓	08:48
BLANK TEST	.000	08:49

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130296

FEBRUARY 05, 2009 ✓
LINE 08:41

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM: OKAY
SOFTWARE DATE: 02/20/01

HEATERS
SAMPLE CHAMBER: 48c
BREATH TUBE: 42c

BAROMETER: 29.57 in

FLOW DETECTOR: OKAY

PUMP
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST
!"#\$%&'()*+,-./0123456789:;<=>?@ABCDEF6
HIJKL MNOPQRSTUVWXYZ[\]^_`abcde fghijklmno
pqrstuvwxy{|}~#