

# VERIFICATION OF CALIBRATION REPORT

of DataMaster cdm Breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

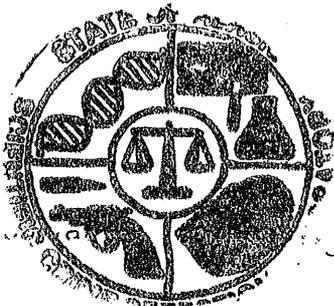
Supervisor/Operator Performing the Verification Procedure:		DataMaster cdm S/N <u>130297</u> ✓
Name <u>JAMES HOELSCHER</u> ✓		ID# <u>5343</u> Date <u>10-21-08</u>
A	Agency <u>Hooper Bay Police Dept.</u>	Phone # <u>758-4615</u>
Instrument Location <u>Hooper Bay, AK</u> ✓		
Alco S/N <u>65859</u> ✓		Target Value <u>.082</u> ✓ High Pressure <u>&lt;100 PSI</u>
B	Alco Test Value Average <u>.085</u> ✓	<u>.086</u> ✓
	1 <sup>st</sup> Alco	2 <sup>nd</sup> Alco
Signature <u>[Signature]</u>		<u>CSB</u> <u>11/20/08</u>
(OVER)		

Under the Alaska Rules of Evidence, I certify that:  
(Do Not Write in the area below)

(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, James Hoelscher, 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,

[Signature]

Jeanne Swartz  
Scientific Director Designee  
State of Alaska  
State Breath Alcohol Testing Program

11/21/08  
Date

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of DataMaster cdm breath Test Instrument

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

DataMaster cdm S/N 130297 ✓

(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 130297

OCTOBER 21, 2008 ✓ COB 11/20/08

OPERATOR'S NAME:  
HOELSCHER/JAMES/C  
OPERATOR'S NUMBER: 5343  
SUBJECT'S LAST NAME:  
VERIFICATION  
SUBJECT'S FIRST NAME/MI :  
OF CALIBRATION  
O.L. #: N/A  
DEPT/AGENCY: HP61  
CASE/REPORT: N/A  
TEST TYPE: U  
ALCO TARGET VALUE: .002 ✓  
ALCO S/N: 65859

--- BREATH ANALYSIS ---

.002 ADJUSTED FOR 30.14 in

ALCO TARGET	.002	14:54
BLANK TEST	.000	14:55
INTERNAL STANDARD	VERIFIED	14:55
ALCO TV 30.14 in	.005 ✓	14:56
BLANK TEST	.000	14:56
SUBJECT SAMPLE	.000	14:57
BLANK TEST	.000	14:58
ALCO TV 30.14 in	.006 ✓	14:58
BLANK TEST	.000	14:59

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130297

OCTOBER 21, 2008 ✓  
TIME 14:51

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY  
PROGRAM: OKAY  
SOFTWARE DATE: 02/20/01  
HEATERS  
SAMPLE CHAMBER: 48c  
BREATH TUBE: 42c  
BAROMETER: 30.14 in  
FLOW DETECTOR: OKAY  
PUMP  
HIGH SPEED: OKAY  
DETECTOR: OKAY  
FILTERS: OKAY  
QUARTZ STANDARD: OKAY  
CALIBRATION: OKAY

PRINTER TEST  
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GHIJKLMNOPQRSTUVWXYZ \ ] ^ \_ ` abcde fghij klmno  
pqrstuvwxy z { | } ~