

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 <u>130300</u> ✓	
Supervisor/Operator Performing the Verification Procedure:	
Name <u>JSwartz</u>	ID# <u>4314</u> Date <u>2/10/09</u> ✓
A Agency <u>SCDL</u> Phone # <u>269-5592</u>	
Instrument Location <u>SCDL</u> ✓	
B Alco S/N <u>SC0108</u> ✓ Target Value <u>.080</u> ✓ High Pressure <u>900psi</u>	
Alco Test Values	<u>.078</u> ✓ <u>.079</u> ✓ 1 st Alco 2 nd Alco
Signature	<u>[Signature]</u> ✓
(OVER)	

AMB
9/9/09

- 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 17th day of Sept, 2009.

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



