

VERIFICATION OF CALIBRATION REPORT

of Datamaster cdm

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

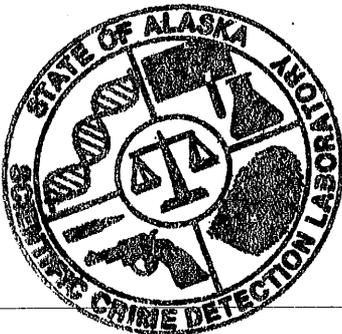
Supervisor/Operator Performing the Verification Procedure:		Datamaster cdm S/N <u>130570</u>	
Name <u>D.R. Sturkie</u>		ID# <u>3559</u>	Date <u>05-20-08</u>
A	Agency <u>APD</u>	Phone # <u>586-8900</u>	
Instrument Location <u>APD 4th AVE SUBSTATION</u>			
Alco S/N <u>X124611</u>		Target Value <u>.075</u>	High Pressure <u>800</u>
B	Alco Test Value Average <u>.078</u>	<u>.078</u>	
	1 st Alco	2 nd Alco	
Signature <u>[Handwritten Signature]</u>			<u>CS</u> <u>6/5/08</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, Daniel Sturkie, 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

[Handwritten Signature]

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

6/9/08

Date

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of Datamaster cdm

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Datamaster cdm S/N 130570

(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 130570

MAY 28, 2008

OPERATOR'S NAME:
STURKIE

OPERATOR'S NUMBER: 3559

SUBJECT'S LAST NAME:

VERIFICATION OF CAL
SUBJECT'S FIRST NAME/NI :
L

O.L. #: L

DEPT/AGENCY: ANCI

CASE/REPORT: L

TEST TYPE: V

ALCO TARGET VALUE: .075

ALCO S/N: X124611

--- BREATH ANALYSIS ---

.075 ADJUSTED FOR 30.25 in
ALCO TARGET .075 00:06
BLANK TEST .000 00:07
INTERNAL STANDARD VERIFIED 00:07
ALCO TV 30.25 in .078 00:07
BLANK TEST .000 00:08
SUBJECT SAMPLE .000 00:09
BLANK TEST .000 00:10
ALCO TV 30.25 in .078 00:10
BLANK TEST .000 00:11

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130570

MAY 28, 2008

TIME 00:02

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM: OKAY
SOFTWARE DATE: 03/20/01
HEATERS
SAMPLE CHAMBER: 53c
BREATH TUBE: 48c
BAROMETER: 30.25 in
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

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H I J K L M N O P Q R S T U V W X Y Z [\] ^ _ ` a b c d e f g h i j k l m n o
p q r s t u v w x y z { | } ~