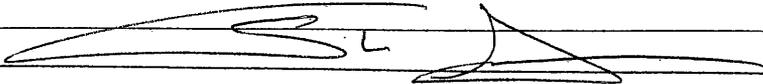


# VERIFICATION OF CALIBRATION REPORT

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>130570</u>
A	Name	<u>S. Dunn</u>	ID# <u>4106</u> Date <u>6/26/08</u> ✓
	Agency	<u>APD</u>	Phone # <u>786-8900</u>
	Instrument Location	<u>4th AVE SUB</u> ✓	
B	Alco S/N	<u>X301765</u> ✓	Target Value <u>.075</u> ✓ High Pressure <u>1100</u>
	Alco Test Value Average	<u>.079</u> ✓	<u>.079</u> ✓
		1 <sup>st</sup> Alco	2 <sup>nd</sup> Alco
Signature			<u>COB</u> <u>7/7/08</u>
(OVER)			

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

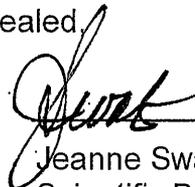
(a) I am Jeanne Swartz, Forensic Scientist III, Scientific Crime Detection Laboratory, State of Alaska Department of Public Safety, and was, at the time of signing, the custodian of the records of the aforementioned laboratory and the signature was made in my official capacity as Scientific Director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

(b) The verification of calibration for the above instrument has been received and reviewed. Instrument operator, Steve P Dunn, 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

7/8/08  
Date

# 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

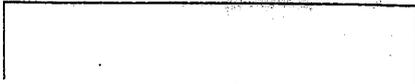
130570 ✓

(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

JUNE 26, 2008 ✓

COB #7/7/08

OPERATOR'S NAME:  
DUNN/S  
OPERATOR'S NUMBER: 4106  
SUBJECT'S LAST NAME:  
VERIFICATION OF CAL  
SUBJECT'S FIRST NAME/INIT:  
V

Q.L. #: V  
DEPT/AGENCY: ANCI  
CASE/REPORT: V  
TEST TYPE: V  
ALCO TARGET VALUE: .075 ✓  
ALCO S/N: X301735 ✓

### --- BREATH ANALYSIS ---

.075 ADJUSTED FOR 29.85 in  
ALCO TARGET .074 09:01  
BLANK TEST .000 09:02  
INTERNAL STANDARD VERIFIED 09:02  
ALCO TV 29.85 in .079 ✓ 09:02  
BLANK TEST .000 09:03  
SUBJECT SAMPLE .000 COB #7/7/08 09:04  
BLANK TEST .000 09:04  
ALCO TV 29.85 in .079 ✓ 09:05  
BLANK TEST .000 09:06

## DIAGNOSTIC CHECK

Handwritten signature 'S. DUNN #1361' in the top left of the Diagnostic Check box.

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130570

JUNE 26, 2008 ✓  
TIME 08:57

### --- DIAGNOSTIC CHECK ---

COMPUTER: OKAY  
PROGRAM: OKAY  
SOFTWARE DATE: 02/20/01  
HEATERS  
SAMPLE CHAMBER: 50c  
BREATH TUBE: 42c  
BAROMETER: 29.85 in  
FLOW DETECTOR: OKAY  
PUMP  
HIGH SPEED: OKAY  
DETECTOR: OKAY  
FILTERS: OKAY  
QUARTZ STANDARD: OKAY  
CALIBRATION: OKAY

### PRINTER TEST

!"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEFGHIJKL  
MNPQRSTUVWXYZ[\]^\_`abcdefgijklmnop  
qrstuvwxyz{|}~