

# 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 130666 ✓

Supervisor/Operator Performing the Verification Procedure:

Name Burlyn C. Rigdon SA. ID# 4154 ✓ Date 9/9/2010 ✓

A Agency Fairbanks P.D. Phone # 907-450-6500

Instrument Location 911 Cushman Street, Fairbanks AK 99701

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B Alco S/N X301596 ✓ Target Value .081 ✓ High Pressure 1300 PSI

Alco Test Values .080 ✓ 1st Alco      .080 ✓ 2nd Alco

Signature [Signature]

(OVER)

*BMB*  
*9/17/10*

(Do Not write in the area below)

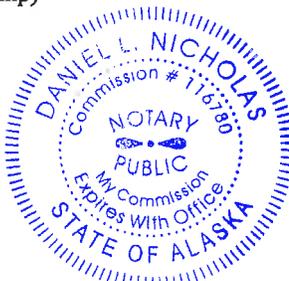
I, Nita J. Bolz, after being first duly sworn, depose and state as follows:

- (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 9th day of Nov, 2010.

[Signature] (Notary Seal Stamp)  
 Daniel L. Nicholas  
 Notary Public, State of Alaska  
 Commission Expires with Office



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1306666 <sup>BMB</sup> 9/17/10

(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

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
 INSTRUMENTS cdm 1306666  
 SEPTEMBER 17, 2010 <sup>BMB</sup> 9/17/10  
 OPERATOR: [faded]  
 SUBJECT: [faded]  
 TEST TYPE: [faded]  
 TEST TARGET VALUE: 0.01  
 ALCOHOL TARGET VALUE: 0.01

TEST TYPE	RESULT	STATUS
BLANK TEST	0.00	PASS
INTEGRAL STRIP	0.00	PASS
FLUID TEST	0.00	PASS
ALCOHOL TEST	0.00	PASS
ALCOHOL TEST	0.00	PASS
ALCOHOL TEST	0.00	PASS
ALCOHOL TEST	0.00	PASS

ALASKA DEPARTMENT OF PUBLIC SAFETY  
 INSTRUMENTS cdm 1306666  
 SEPTEMBER 17, 2010  
 THE DATE  
 --- DIAGNOSTIC CHECK ---  
 COMPUTER: [faded]  
 PROGRAM: [faded]  
 DEFINE DATE: [faded]  
 CENTER: [faded]  
 SAMPLE CHARGE: [faded]  
 BREATH TEST: [faded]  
 INSTRUMENT: [faded]  
 FLUID TEST: [faded]  
 PUMP: [faded]  
 HIGH PRESS: [faded]  
 DETECTOR: [faded]  
 FILTERS: [faded]  
 BATTERY: [faded]  
 CALIBRATION: [faded]

ALCOHOL TEST  
 RESULT: [faded]  
 STATUS: [faded]