

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>130114</u> ✓ | |
| Name <u>Kevin Stevenson</u> | ID# <u>2414</u> Date <u>09.06.08</u> ✓ |
| Agency <u>WAA Police Dept.</u> | Phone # <u>907.786.1120</u> |
| Instrument Location <u>WAA Police Dept OUT ROOM</u> ✓ | |
| Alco S/N <u>X301591</u> ✓ | Target Value <u>.080</u> ✓ High Pressure <u>800</u> |
| Alco Test Value Average <u>.080</u> ✓ | <u>.079</u> ✓ |
| 1 st Alco | 2 nd Alco |
| Signature <u>Kevin Stevenson</u> ✓ | <u>CSB</u> <u>9/11/08</u> |

Under the Alaska Rules of Evidence, I certify that: (OVER)

(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, Kevin Stevenson, 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

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

9/11/08

Date

SEP 11 2008

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 130114 ✓

(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 130114

SEPTEMBER 06, 2008 ✓ *COB 9/11/08*

OPERATOR'S NAME:
STEVENS ON KEVIN M
OPERATOR'S NUMBER: 2414
SUBJECT'S LAST NAME:
VERIFICATION
SUBJECT'S FIRST NAME/MI :
VERIFICATION
O.L. #: 2345
DEPT/AGENCY: ANC7
CASE/REPORT: 0809
TEST TYPE: U
ALCO TARGET VALUE: .000 ✓
ALCO S/N: X301591 ✓

— BREATH ANALYSIS —

.000 ADJUSTED FOR 30.17 in
ALCO TARGET .000 17:44
BLANK TEST .000 17:45
INTERNAL STANDARD VERIFIED 17:45
ALCO TU 30.17 in .000 ✓ 17:46
BLANK TEST .000 17:46
SUBJECT SAMPLE .000 *COB* 17:47
BLANK TEST .000 *9/11/08* 17:48
ALCO TU 30.17 in .079 ✓ 17:48
BLANK TEST .000 17:49

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130114

SEPTEMBER 06, 2008 ✓
TIME 17:42

— DIAGNOSTIC CHECK —

COMPUTER: OKAY
PROGRAM: OKAY
SOFTWARE DATE: 02/20/01
HEATERS
SAMPLE CHAMBER: 49c
BREATH TUBE: 42c
BAROMETER: 30.17 in
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

!#\$%&'()*+,-./0123456789:;<=>?@ABCDEFG
HIJKL MNOPQRSTUVWXYZ[\]^_`abcdefg h i j k l m n o
p q r s t u v w x y z { | } ~ ■