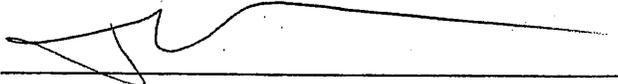


# VERIFICATION OF CALIBRATION REPORT

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>130119</u> ✓
Name <u>Tobin P Brennan</u>		ID# <u>4542</u> Date <u>2-28-08</u>
A	Agency <u>Soldotna Police Department</u>	Phone # <u>262-4455</u>
Instrument Location <u>Soldotna Police Department</u>		
Alco S/N <u>X172933</u> ✓		Target Value <u>.080</u> ✓ High Pressure <u>400</u>
B	Alco Test Value Average <u>.078</u>	<u>.079</u>
	1 <sup>st</sup> Alco	2 <sup>nd</sup> Alco
Signature 		

(OVER)

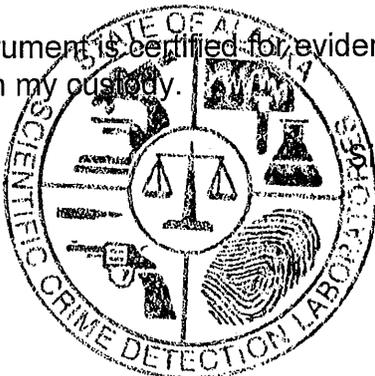
(Do Not write in the area below)

Under the Alaska Rules of Evidence, I certify that;

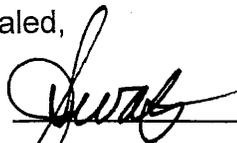
(a) I am Jeanne Swartz, Criminalist III, Scientific Crime Detection Laboratory, State of Alaska Department of Public Safety, and was, at the time of signing, the custodian of the records of the aforementioned laboratory and the signature was made in my official capacity as Scientific Director Designee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

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

3/6/08  
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 130119

(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 130119

FEBRUARY 28, 2000  
*CCB 3/10/08*

OPERATOR'S NAME: BRENNAN  
OPERATOR'S NUMBER: 4542  
SUBJECT'S LAST NAME:  
VERIFICATION OF CAL  
SUBJECT'S FIRST NAME/NI :  
UOC  
O.L. #: VUC  
DEPT/AGENCY: SLD1  
CASE/REPORT: UOC  
TEST TYPE: U  
ALCO TARGET VALUE: .000  
ALCO S/N: X172933

--- BREATH ANALYSIS ---

.000 ADJUSTED FOR 29.59 in		
ALCO TARGET	.079	18:58
BLANK TEST	.000	18:59
INTERNAL STANDARD	VERIFIED	18:59
ALCO TV 29.59 in	.078	18:59
BLANK TEST	.000	19:00
SUBJECT SAMPLE	.000	19:01
BLANK TEST	.000	19:01
ALCO TV 29.59 in	.079	19:02
BLANK TEST	.000	19:02

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130119

FEBRUARY 28, 2000  
TIME 18:56

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM:	OKAY
SOFTWARE DATE:	03/29/00
HEATERS	
SAMPLE CHAMBER:	49c
BREATH TUBE:	45c
BAROMETER:	29.57 in
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST  
!"#\$%&'()\*+,-./0123456789:;<=>?@ABCDEF  
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pqrs tuvwxyz{|}~