

# 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 <u>130195</u> ✓	
Supervisor/Operator Performing the Verification Procedure:	
Name <u>Robert J. Ely</u>	ID# <u>2681</u> Date <u>07-09-2008</u> ✓
A Agency <u>Craig Police Department</u> ✓	Phone # <u>(907) 826-3330</u>
Instrument Location <u>506 2<sup>nd</sup> Street, Craig Alaska 99921</u>	
Alco S/N <u>77286</u> ✓	Target Value <u>.079</u> ✓ High Pressure <u>900</u> PSI
Alco Test Value Average <u>.086</u> ✓	<u>.084</u> ✓
1 <sup>st</sup> Alco	2 <sup>nd</sup> Alco
Signature <u><i>Robert J. Ely</i></u>	<i>CWB</i> <i>7/25/08</i>
(OVER)	

(Do Not write in the area below)

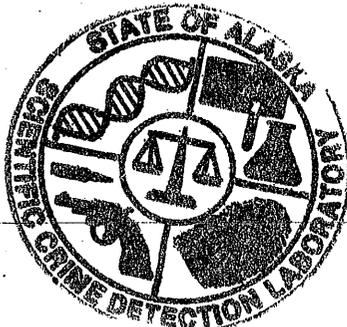
Under the Alaska Rules of Evidence, I certify that,

(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, Robert J Ely, 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



*J Swartz* 7/28/08  
Date  
Jeanne Swartz  
Scientific Director Designee  
State of Alaska  
State Breath Alcohol Testing Program

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DataMaster cdm S/N 130195 ✓

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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 130195

JULY 09, 2008 ✓ *COB 7/26/08*

OPERATOR'S NAME:  
ELV, RJ  
OPERATOR'S NUMBER: 2681  
SUBJECT'S LAST NAME:  
VERIFICATION OF CAL  
SUBJECT'S FIRST NAME/MI :  
USER OF CAL  
O.L. #: 123456789  
DEPT/AGENCY: CRG1  
CASE/REPORT: 2008-XXXX  
TEST TYPE: V  
ALCO TARGET VALUE: .079 ✓  
ALCO S/N: 77286 ✓

--- BREATH ANALYSIS ---

.079 ADJUSTED FOR 30.22 in		
ALCO TARGET	.079	16:16
BLANK TEST	.000	16:17
INTERNAL STANDARD	VERIFIED	16:17
ALCO TO 30.22 in	.086 ✓	16:18
BLANK TEST	.000	16:18
SUBJECT SAMPLE	.000 <i>COB 7/26/08</i>	16:19
BLANK TEST	.000	16:20
ALCO TO 30.24 in	.094 ✓	16:20
BLANK TEST	.000	16:21

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130195

JULY 09, 2008 ✓  
TIME 16:24

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY  
PROGRAM: OKAY  
SOFTWARE DATE: 02/20/01

HEATERS  
SAMPLE CHAMBER: 49c  
BREATH TUBE: 43c

BAROMETER: 30.24 in

FLOW DETECTOR: OKAY

PUMP  
HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST  
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