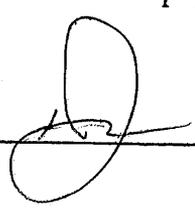


# VERIFICATION OF CALIBRATION REPORT

of Datamaster cdm

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Supervisor/Operator Performing the Verification Procedure:		Datamaster cdm S/N <u>130308</u> ✓	
Name <u>Malik Jones</u>		ID# <u>5830</u>	Date <u>11/30/08</u> ✓
Agency <u>AST</u>		Phone # <u>451-5100</u>	
Instrument Location <u>Healy</u> ✓			
Alco S/N <u>473355</u> ✓		Target Value <u>.078</u> ✓	High Pressure <u>550 PSI</u>
Alco Test Value Average <u>.079</u> ✓		<u>.078</u> ✓	
1 <sup>st</sup> Alco		2 <sup>nd</sup> Alco	
Signature 		COB 12/10/08	

(OVER)

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

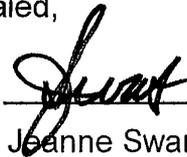
(a) I am Jeanne Swartz, Forensic Scientist III, Scientific Crime Detection Laboratory, State of Alaska Department of Public Safety, and was, at the time of signing, the custodian of the records of the aforementioned laboratory and the signature was made in my official capacity as Scientific Director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

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

12/10/08

Date

# VERIFICATION OF CALIBRATION REPORT

of Datamaster cdm

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Datamaster cdm S/N

130308 ✓

(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 130308

NOVEMBER 30, 2008 ✓

OPERATOR'S NAME: ✓  
JONES/HALIK/JAMAL  
OPERATOR'S NUMBER: 5830  
SUBJECT'S LAST NAME: ✓  
VERIFICATION OF CAL  
SUBJECT'S FIRST NAME/NI: ✓  
U

O.L. #: 1  
DEPT/AGENCY: HLY8  
CASE/REPORT:  
TEST TYPE: U  
ALCO TARGET VALUE: .082 ✓  
ALCO S/N: X173355

--- BREATH ANALYSIS ---

.082 ADJUSTED FOR 28.76 in		
ALCO TARGET	.078	11:23
BLANK TEST	.000	11:24
INTERNAL STANDARD	VERIFIED	11:24
ALCO TU 28.76 in	.079 ✓	11:24
BLANK TEST	.000	11:25
SUBJECT SAMPLE	.000	11:26
BLANK TEST	.000	11:27
ALCO TU 28.76 in	.078 ✓	11:27
BLANK TEST	.000	11:28

## DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY  
DATAMASTER cdm 130308

NOVEMBER 30, 2008 ✓  
TIME 11:29

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY

PROGRAM: OKAY

SOFTWARE DATE: 02/20/01

HEATERS

SAMPLE CHAMBER: 48c

BREATH TUBE: 41c

BAROMETER: 28.76 in

FLOW DETECTOR: OKAY

PUMP

HIGH SPEED: OKAY

DETECTOR: OKAY

FILTERS: OKAY

QUARTZ STANDARD: OKAY

CALIBRATION: OKAY

PRINTER TEST

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