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 130570

Supervisor/Operator Performing the Verification Procedure:

A

Name C. RITALA ID# 3791 Date 2/12/08

Agency APD Phone #

Instrument Location FLORA SUB-STATION (4TH AVE.)

B

Alco S/N 77199 Target Value .083 High Pressure 1200

Alco Test Values .080 (1st Alco) .079 (2nd Alco)

Signature Chris Ritala /1349

(OVER)

CJB 3/10/08

(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, Chris Ritala , 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,

03/10/08

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

Date

STATE OF ALASKA SCIENTIFIC CRIME DETECTION LABORATORIES

BT9 03/00

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 130570

(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 130570

FEBRUARY 12, 2008 COB 3/10/08

OPERATOR'S NAME:
RITALA
OPERATOR'S NUMBER: 3791
SUBJECT'S LAST NAME:
VERIFICATION OF CALIBRATION
SUBJECT'S FIRST NAME/MI :
A
O.L. #: A
DEPT/AGENCY: ANC1
CASE/REPORT: A
TEST TYPE: V
ALCO TARGET VALUE: 083
ALCO S/N: 77199

--- BREATH ANALYSIS ---

.083 ADJUSTED FOR 29.75 in

ALCO TARGET	.082	21:51
BLANK TEST	.000	21:52
INTERNAL STANDARD	VERIFIED	21:52
ALCO TV 29.75 in	.080	21:53
BLANK TEST	.000	21:53
SUBJECT SAMPLE	.050 COB 3/10/08	21:54
BLANK TEST	.000	21:55
ALCO TV 29.75 in	.079	21:55
BLANK TEST	.000	21:56

CR1349 2/12/08

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130570

FEBRUARY 12, 2008
TIME 21:49

--- DIAGNOSTIC CHECK ---

COMPUTER:	OKAY
PROGRAM:	OKAY
SOFTWARE DATE:	02/20/01
HEATERS	
SAMPLE CHAMBER:	55c
BREATH TUBE:	41c
BAROMETER:	29.75 in
FLOW DETECTOR:	OKAY
PUMP	
HIGH SPEED:	OKAY
DETECTOR:	OKAY
FILTERS:	OKAY
QUARTZ STANDARD:	OKAY
CALIBRATION:	OKAY

PRINTER TEST
!"#$%&'()*+,-./0123456789:;<=>?@ABCDEFG
HIJKLMNOPQRSTUVWXYZ[\]^_`abcdefghijklmno
pqrstuvwxyz{|}~

CR1349 2/12/08