

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>130125</u>	
Name <u>Michael A. Wery</u>		ID# <u>3590</u>	Date <u>2-3-09</u> ✓
A	Agency <u>AST</u>	Phone # <u>451-5100</u>	
Instrument Location <u>Fairbanks AST</u> ✓			
Alco S/N <u>X 301581</u> ✓		Target Value <u>.082</u> ✓	High Pressure <u>400</u>
B	Alco Test Value Average <u>.076</u> ✓ 1 st Alco		<u>.078</u> ✓ 2 nd Alco
Signature <u>Michael A. Wery</u>		<u>CSB</u> <u>2/9/09</u>	
(OVER)			

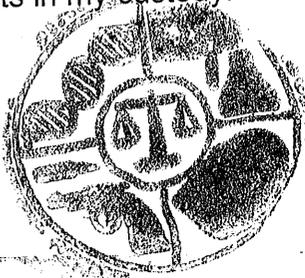
(Do Not write in the area below)

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, Michael A Wery, 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

2/9/09
Date

VERIFICATION OF CALIBRATION REPORT

of Datamaster cdm

State of Alaska

Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program

Datamaster cdm S/N 130125 ✓

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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 130125

FEBRUARY 03, 2009 *gob 2/3/09*

OPERATOR'S NAME:
MERY/MICHAEL/A
OPERATOR'S NUMBER: 3590
SUBJECT'S LAST NAME:
VERIFICATION
SUBJECT'S FIRST NAME/MI :
OF CALIBRATION
O.L. #: 0
DEPT/AGENCY: FBK0
CASE/REPORT:
TEST TYPE: U
ALCO TARGET VALUE: .082 ✓
ALCO S/N: X301581

--- BREATH ANALYSIS ---

.082 ADJUSTED FOR 29.54 in
ALCO TARGET .080 12:03
BLANK TEST .000 12:04
INTERNAL STANDARD VERIFIED 12:04
ALCO TV 29.54 in .076 ✓ 12:04
BLANK TEST .000 12:05
SUBJECT SAMPLE *gob 2/3/09* .000 ✓ 12:05
BLANK TEST .000 ✓ 12:06
ALCO TV 29.54 in .078 12:06
BLANK TEST .000 12:07

DIAGNOSTIC CHECK

ALASKA DEPARTMENT OF PUBLIC SAFETY
DATAMASTER cdm 130125

FEBRUARY 03, 2009 ✓
TIME 12:01

--- DIAGNOSTIC CHECK ---

COMPUTER: OKAY
PROGRAM: OKAY
SOFTWARE DATE: 02/20/01
HEATERS
SAMPLE CHAMBER: 49c
BREATH TUBE: 41c
BAROMETER: 29.54 in
FLOW DETECTOR: OKAY
PUMP
HIGH SPEED: OKAY
DETECTOR: OKAY
FILTERS: OKAY
QUARTZ STANDARD: OKAY
CALIBRATION: OKAY

PRINTER TEST

! " # \$ % & ' () * + , - . / 0 1 2 3 4 5 6 7 8 9 : ; < = > ? @ A B C D E F G
H I J K L M N O P Q R S T U V W X Y Z [\] ^ _ ` a b c d e f g h i j k l m n o
p q r s t u v w x y z { | } ~