Alaska Scientific Crime Detection Laboratory

Change in Instrument Status Form

Issued: 12/15/2017 Version: CIISF 2017 R0 Status: Active

| Date: 10/27/2021 Instrument Serial Numb | er: 100404 |
|------------------------------------------------------------------------------------------------------------------------|-----------------------------------|
| Instrument Location: St. Paul PD | |
| Supervisor Name and Agency: Carlie Glaister S | CDL |
| | |
| Describe the Status Change or Issue with the Instrument: Instrument removed from Service (Muintenance. | or preventative |
| No breath supervisor at agency. | |
| last breath test on 1/5/2021. Last 1 Instrument last solled in DM Host on date was used as out of service da | 10C 9/20/2021. This |
| | |
| If instrument was placed in service or removed from service, fill ou In Service Date/Time: Out of Service Date/Time: | t the appropriate sections below. |
| For Use by SCDL Additional Notes | |
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Email completed form to dps.scdl.toxicology@alaska.gov

For questions contact the Breath Alcohol Program at 907-269-5740