ETHANOL GAS STANDARD CYLINDER REPORT

NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION-TOXICOLOGY SECTION/BREATH ALCOHOL PROGRAM
SFN 59282 (05/2026)

Chemical Test Operator Name (Print)		
Location	Intoxilyzer® Serial Number	
Gas Lot Number	Gas Cylinder Number	Gas Expiration Date

Check When Done:

- ☐ 1. Scan/Enter Gas Cylinder Information (Level 1, Function S).
- ☐ 2. Perform an ACA Test (Level 1, Function C).

  Write in the ACA Test Results (Reported to 3 Digits, Ex. 0.081).

  A. 0.___ AC
  B. 0.___ AC
  C. 0.___ AC
- ☐ 3. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the Intoxilyzer® for Use.
- ☐ 4. File Previous Intoxilyzer® Record (SFN50496, Form 120-G) at the Intoxilyzer® Location at the Agency.
- ☐ 5. Send the Following to the Crime Laboratory:

  A. Ethanol Gas Standard Cylinder Report (SFN59282, Form 105-G).
  B. ACA Test Record.

Chemical Test Operator Signature	Date

Crime Laboratory Use Only

Reviewed By (Print Name)	Reviewed By Signature	Date