



INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT
 OFFICE OF ATTORNEY GENERAL
 CRIME LABORATORY DIVISION
 Toxicology Section/Breath Alcohol Program
 SFN 59281 (10-2016)

Serial Number <i>80-006688</i>	Instrument Location <i>STEE</i>
Reason for Install/Repair <input checked="" type="checkbox"/> Install After Receiving From Crime Laboratory <input type="checkbox"/> Install After Location Change <input type="checkbox"/> Other (Specify) _____	

Check When Done:

- 1. Surge Protector Installed/Properly Grounded.
- 2. Telephone Line Connected to Intoxilyzer® 8000. *NA*
- 3. Breath Tube Heated.
- 4. Enter Preliminary Data (i.e. Date, Time, DST (Y), and Location; Level 2, Function E).
- 5. Scan/Enter Gas Cylinder Information (Level 1, Function S).
- 6. Run Tests:
 - A. Print Test (Level 1, Function P).
 - B. ACA Test (Level 1, Function C).
 - C. RFI Test (CMS Mode or Level 1, Function B or C; Key Radio During Test).
- 7. Repair and/or Maintenance Performed (if Any): _____
- 8. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the Intoxilyzer® for Use.
- 9. File Previous Intoxilyzer® Record (SFN50496, Form 120-G) at the Intoxilyzer® Location at the Agency.
- 10. Send the Following to the Crime Laboratory: Completed Intoxilyzer®8000 Installation and Repair Checkout (SFN59281, Form 104-G), Print Test, ACA Test, and RFI Test.

Field Inspector Signature <i>Dorel Felber</i>	Date <i>01 NOV 17</i>
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Crime Laboratory Use Only

This installation has been reviewed and the instrument is approved to be used for the analysis of breath to determine alcohol concentration from the date the Field Inspector performed the installation. This record on file at the Office of Attorney General, Crime Laboratory Division, in the County of Burleigh, North Dakota, is certified to be a true and correct copy of the documents received.

Reviewed/Certified by <i>Roberta Hungen-Nimmis</i>	Certified Date <i>02 NOV 17</i>
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Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006688
Location = STEE 8164.14.00 09/16
11/01/2017 15:46

***** Printer Test *****

abcdefghijklmnopqrstuvwxy1234567890-=-|
ABCDEFGHIJKLMNopqrstuvwxyz!@#\$\$%^&*()_+?

abcdefghijklmnopqrstuvwxy1234567890-=-|
ABCDEFGHIJKLMNopqrstuvwxyz!@#\$\$%^&*()_+?

Current Instrument Setup

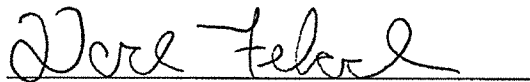
Data Entry Mode: Enabled
Start Test Sequence: DABACABA
Display Prelim Rslt? Yes
Display Third Digit? Yes
Inhib Printer(Y/N)? No
Display Volume? No
Disable On Memfull? Yes
of Print Copies? 1
Select Std (D/W/I)? Dry
Standard Value? 0.080
Standard Lot #? 03417080A3
Standard Cyl #? 28
Standard Expiration? 03/05/2019
Oper No? 119404

Flow Cal. Date: 09/07/2016
Slope 698
Intercept -642832

IR Calibration Date: 09/07/2016
 3um 9um

0th Coef(*100): -10822 -23152
1st Coef(*100): 262468 134492
2nd Coef(*100): 3796 1436
H2O adj(mg/l*10k): 665 568

***** Printer Test End *****



Operator Signature
DAVID FELAND

Remarks:

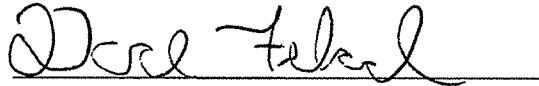
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006688
Location = STEE 8164.14.00 09/16
11/01/2017 15:53

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:53
02 Std. Gas	0.080	15:54
03 Room Air	0.000	15:54
04 Std. Gas	0.082	15:55
05 Room Air	0.000	15:55
06 Std. Gas	0.081	15:55
07 Room Air	0.000	15:56

Lot No = 03417080A3
Cyl No = 28
Exp Date = 03/05/2019
County = 22 Oper No. = 119404



Operator Signature
DAVID FELAND

Remarks:

Form 106-I8000

Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

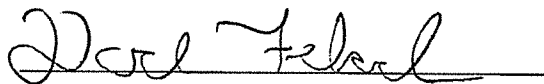
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006688
Location = STEE 8164.14.00 09/16
11/01/2017 15:47

Test	AC	Time
01 Diagnostic	OK	15:49
02 Room Air	0.000	15:50
03 *Subject Test	RFI*	15:52
04 Room Air	0.000	15:52

*Invalid Test
Inhibited - RFI

Sub Name = TEST, TEST TEST
Sub DOB = 11/11/2011
Sub Sex = Male Weight = 100
Test = DUI Cit = NA
Dr. Lic. = ND/NA
Lot No = 03417080A3
Cyl No = 28
Expiration Date = 03/05/2019
County = 22 Oper No. = 119404

I followed the Approved Method and the instructions displayed by the Intoxilyzer in conducting this test.



Operator Signature
DAVID FELAND

Remarks: