



ETHANOL GAS STANDARD CYLINDER REPORT
 NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
 CRIME LABORATORY DIVISION-TOXICOLOGY SECTION/BREATH ALCOHOL PROGRAM
 SFN 59282 (08/2018)

Chemical Test Operator Name (Print) <u>Jared Lemieux</u>		
Location <u>4000 Apple Creek Rd (RMDC)</u>	Intoxilyzer® Serial Number <u>80-006674</u>	
Gas Lot Number <u>24219080A1</u>	Gas Cylinder Number <u>30</u>	Gas Expiration Date <u>11/5/2021</u>

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. 0.081 AC
 - B. 0.081 AC
 - C. 0.082 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 <u>[Signature]</u> <u>4834</u>	Date <u>1/22/2020</u>
Reviewed By (Crime Laboratory Use Only) <u>[Signature]</u>	Date <u>3/4/2020</u>


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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006674
Location = BMDC 8164.14.00 09/16
01/22/2020 16:27

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:28
02 Std. Gas	0.081	16:28
03 Room Air	0.000	16:29
04 Std. Gas	0.081	16:29
05 Room Air	0.000	16:30
06 Std. Gas	0.082	16:30
07 Room Air	0.000	16:30

Lot No = 24119080A1
Cyl No = 30
Exp Date = 11/05/2021
County = 08 Oper No. = 130315

 4834
Operator Signature
JARED LEMIEUX

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 80-006674
Location = BMDC 8164.14.00 09/16
01/21/2020 18:35

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	18:36
02 Std. Gas	0.082	18:36
03 Room Air	0.000	18:37
04 Std. Gas	0.082	18:37
05 Room Air	0.000	18:38
06 Std. Gas	0.082	18:38
07 Room Air	0.000	18:38

Lot No = 34917080A3
Cyl No = 25
Exp Date = 02/05/2020
County = 08 Oper No. = 130315


Operator Signature
JARED LEMIEUX

Remarks: *Good to go*
**will change gas on 1/22/20*
Form 106-I8000