# OFFICE OF ATTORNEY GENERAL CRIME LABORATORY DIVISION

Toxicology Section/Breath Alcohol Program Intoxilyzer® 8000 Inspection

## **INTOXILYZER® 8000 INSPECTION**

Intoxil	yzer® 8000 Serial Number: <u>80-00668</u> l	Location: ToxL
Α.	General Setup and Checks:  1.	e-set if necessary. ecord.
B.	Tests (Sign and attach test records):  Configure simulator for the following tests (Level 1  Wet Calibration Check  a.	0.03 AC:
C.	Remarks/Maintenance: ANNUAL INSPERENCED SIMULATOR RETURN O-RING	CT70N
•	rument is acceptable to be used in the field.  Analyst Signature	<u>5/27/20</u> Date
Reviev	ved by	Date

02/18

Issuing Authority - CEE

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006681
Location = TOXL 8164.14.00 09/16
05/27/2020 13:00

\*\*\*\*\*\*\*\* Printer Test \*\*\*\*\*\*\*\*

abcdefghijklmnopqrstuvwxyz1234567890-= |
ABCDEFGHIJKLMNOPQRSTUVWXYZ!@#\$%^&\*() +?

abcdefghijklmnopqrstuvwxyz1234567890-=| 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 #? 24119080A1 Standard Cyl #? Standard Expiration? 11/05/2021 Oper No? 666666

Flow Cal. Date: 05/27/2020 Slope 651 Intercept -622365

IR Calibration Date: 05/27/2020
3um 9um

Oth Coef(\*100): -10420 -19573 1st Coef(\*100): 269401 137403 2nd Coef(\*100): 1095 923 H2O adj(mg/l\*10k): 127 287

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

Operator Signature CHARLES EDER

Remarks:

Form 106-I8000

CMI, Inc. Intoxilyzer North Dakota Model 8000 Location = TOXL 05/27/2020 Alcohol Analyzer SN 80-006681 8164.14.00 09/16 13:02

#### WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:02
02 Std. Sol.	0.018	13:03
03 Room Air	0.000	13:03
04 Std. Sol.	0.019	13:04
05 Room Air	0.000	13:05
06 Std. Sol.	0.019	13:05
07 Room Air	0.000	13:06

08 Sim Temp = 34.0°C

Simul Ser No = MP3064 Std Sol No = 20070

County = 08

Oper No. = 666666

Operator Signature CHARLES EDER

Remarks:

Form 106-I8000

LOW AC

0.020 AC

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
05/27/2020

SN 80-006681 8164.14.00 09/16 13:07

#### WET CAL CHECK

Test			AC	Time
01	Room	Air	0.000	13:07
02	Std.	Sol.	0.298	13:08
03	Room	Air	0.000	13:09
04	Std.	Sol.	0.302	13:09
05	Room	Air	0.000	13:10
06	Std.	Sol.	0.302	13:11
07	Room	Air	0.000	13:11

 $08 \text{ Sim Temp} = 34.0^{\circ}\text{C}$ 

Simul Ser No = MP3069 Std Sol No = 201902D

County = 08

Oper No. = 666666

Operator Signature CHARLES EDER

Remarks:

Form 106-I8000

0.300

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006681
Location = TOXL 8164.14.00 09/16
05/27/2020 13:12

Test	AC	Time
01 Room Air	0.000	13:13
02 *Subject Test	INT*	13:13
03 Room Air	0.000	13:14

<sup>\*</sup>Invalid Test

Interferent Detected

Sub Name = DISCOVER, THE SPIRIT

Sub DOB = 02/01/1992

Sub Sex = Female Weight = 150

Test = DUI Cit = INTERFERENT

Dr. Lic. = ND/DIS921456

Lot No = 05620080A1

Cyl No = 47

Expiration Date = 04/05/2022

County = 08 Oper No. = 666666

Operator Signature CHARLES EDER

Remarks:

Interferent Check 0.10AC + 0.05% ACETONE FORM 106-18000

CMI, Inc. Intoxilyzer	Alcohol Analyzer
North Dakota Model 8000	SN 80-006681
Location = TOXL	8164.14.00 09/16
05/27/2020	13:14

Test	AC	Time
01 Diagnostic	OK	13:15
02 Room Air	0.000	13:15
03 *Subject Test	RFI*	13:15
04 Room Air	0.000	13:16

\*Invalid Test Inhibited - RFI

Sub Name = DISCOVER, THE SPIRIT

Sub DOB = 02/01/1992

Sub Sex = Female Weight = 150
Test = DUI Cit = RFI CHECK

Dr. Lic. = ND/DIS921456

Lot No = 05620080A1

Cyl No = 47

Expiration Date = 04/05/2022

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

Operator Signature CHARLES EDER

Remarks:

Form 106-I8000

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
05/27/2020

Alcohol Analyzer SN 80-006681 8164.14.00 09/16 13:16

#### DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:16
02 Std. Gas	0.080	13:17
03 Room Air	0.000	13:17
04 Std. Gas	0.079	13:18
05 Room Air	0.000	13:18
06 Std. Gas	0.080	13:18
07 Room Air	0.000	13:19

Lot No = 05620080A1

Cyl No = 47

Exp Date = 04/05/2022

County = 08

Oper No. = 666666

Operator Signature
CHARLES EDER

ALIBRATION CHECK

0.080 Ac

Form 106-I8000

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
05/27/2020

Alcohol Analyzer SN 80-006681 8164.14.00 09/16 13:19

#### DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:20
02 Std. Gas	0.080	13:20
03 Room Air	0.000	13:21
04 Std. Gas	0.080	13:21
05 Room Air	0.000	13:21
06 Std. Gas	0.079	13:22
07 Room Air	0.000	13:22

Lot No = 05620080A1

Cyl No = 47

Exp Date = 04/05/2022

County = 08

Oper No. = 666666

Operator Signature CHARLES EDER

Remarks:

Form 106-I8000

0.080 AC

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
05/27/2020

Alcohol Analyzer SN 80-006681 8164.14.00 09/16 13:22

### DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:23
02 Std. Gas	0.079	13:23
03 Room Air	0.000	13:24
04 Std. Gas	0.079	13:24
05 Room Air	0.000	13:25
06 Std. Gas	0.080	13:25
07 Room Air	0.000	13:26

Lot No = 05620080A1

Cyl No = 47

Exp Date = 04/05/2022

County = 08

Oper No. = 666666

Operator Signature

Remarks:

Form 106-I8000

0.080AC