

## INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT

NORTH DAKOTA OFFICE OF ATTORNEY GENERAL CRIME LABORATORY DIVISION-TOXICOLOGY SECTION/BREATH ALCOHOL PROGRAM SFN 59281 (06/2018)

Serial Number 80 - 00 6 6 6 7	Instrument Location Golden Valley County Shoriffs Office.
Reason for Install/Repair	Selecti Come, Spenia Ciri
Install After Receiving From Crime Laboratory 🔲 Install	After Location Change
Other (Specify)	
Check When Done:	
1. Surge Protector Installed/Property Grounded.	
2. Telephone Line Connected to Intoxilyzer® 8000.	
∑ 3. Breath Tube Heated.	
↑ 4. Enter Preliminary Data (i.e. Date, Time, DST (Y), and Loc	cation; Level 2, Function E).
5. Scan/Enter Gas Cylinder Information (Level 1, Function S	
☑ 6. Run Tests:	
☑ A. Print Test (Level1, Function P).	
B. ACA Test (Level 1, Function C).	
C. Radio Frequency Interference (RFI) Test (CMS Mode	or Level 1, Function B or C; Key Radio During Test).
7. Repair and/or Maintenance Performed (if any): Vone	, ANNVAL MAININANCE COMPLETED ON 05/19/2021
∑ 8. Complete the Top Portion of the Intoxilyzer® Record (SFI)	N50496, Form 120-G) and Place it by the Intoxilyzer® for Use.
∑ 9. File Previous Intoxilyzer® Record (SFN504096, Form 120	0-G) at the Intoxilyzer® Location at the Agency.
10. Send the Following to the Crime Laboratory: Completed 104-G), Print Test, ACA Test, and RFI Test.	Intoxilyzer® 8000 Installation and Repair Checkout (SFN59281, Form
Field Inspector Signature  Duy Muffle	Date 05/2-1/2021
Crime Laboratory Use Only	
	be used for the analysis of breath to determine alcohol concentration from in file at the Office of Attorney General, Crime Laboratory Division, in the copy of the documents received.
Reviewed/Certified By	Certified Date 5/25/2021

FORM 104-G

SN 80-006667

Page 1 of 5

Uploaded 5/25/2021 CEE

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006667
Location = GLDN 8164.14.00 09/16
05/24/2021 12:58

\*\*\*\*\*\*\* 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 #? Standard Cyl #? 24119080A1 Standard Expiration? 11/05/2021 Oper No? 130349

Flow Cal. Date: 05/22/2020 Slope 678 Intercept -711846

IR Calibration Date: 05/22/2020 3um 9um

	THE PARTY NAME OF		
0th	Coef(*100):	-22305	-20910
1st	Coef(*100):	281966	134470
2nd	Coef(*100):	1570	1173
H20	adj $(mg/l*10k)$ :	336	351

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

Operator Signature DEY MUCKLE

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 Location = GLDN 05/24/2021

SN 80-006667 8164.14.00 09/16 13:34

## DRY CAL CHECK

Te	est		AC	Time
01	Room	Air	0.000	13:35
02	Std.	Gas	0.080	13:35
03	Room	Air	0.000	13:36
04	Std.	Gas	0.080	13:36
05	Room	Air	0.000	13:37
06	Std.	Ças	0.081	13:37
07	Room	Air	0.000	13:38

Lot No = 24119080A1

Cyl No = 8

Exp Date = 11/05/2021

County = 17

Oper No. = 130349

Operator Signature DEY MUCKLE

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 80-006667
Location = GLDN	8164.14.00 09/16
05/24/2021	13:40

Test	AC	Time
01 Diagnostic	OK	13:44
02 Room Air	0.000	13:44
03 *Subject Test	0.000*	13:47
04 Room Air	0.000	13:50
05 Std. Gas	0.079	13:51
06 Room Air	0.000	13:52
07 *Subject Test	RFI**	13:54
08 Room Air	0.000	13:54

<sup>\*</sup>Deficient Sample - Value Printed was Highest Obtained \*\*Invalid Most

Sub Name = TEST, INSTALL NA
Sub DOB = 01/01/1900
Sub Sex = Unknown Weight = NA
Test = OTH Cit = 0000000
Dr. Lic. = ND/INSTALL TEST
Lot No = 24119080A1
Cyl No = 8

Expiration Date = 11/05/2021County = 17 Oper No. = 130349

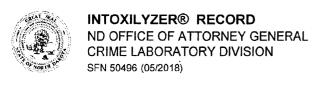
I followed the Approved Method and the instructions displayed by the Intoxilyzer in conducting this test.

Operator Signature
DEY MUCKLE

Remarks:

Form 106-I8000

<sup>\*\*</sup>Invalid Test
Inhibited - RFI



Intoxilyzer® Serial Nun	nber 80-00666	7 Golden Valley County Sheriffs Office
	9080AI	Gas Cylinder Number  Gas Expiration Date  11/05/2021
Test Date	Chemical Test Operator Number	Operator's Name (PRINT Last Name, First, MI)
05/24/2021	130349	Muchle, Det J. / Intox Re-Install, Annual Mointnena
21/24/2021	130349	Muscle, Det J., Print Tost Fidinsi
05/24/2021	130349	Muchle, Phi J, Gus Cal Chark, ACA
05/24/2021	130349	Mockle, Day J. R.F.J. Test, CMS
, , , , , , , , , , , , , , , , , , , ,	·	
	:	

FORM 120-G

AGENCY RETAIN AT INTOXILYZER® LOCATION