

## 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)<br>Muckle, Dey, J |                     |                            |                     |
|-------------------------------------------------------|---------------------|----------------------------|---------------------|
| Location                                              |                     | Intoxilyzer® Serial Number |                     |
| Golden Valley County Sheriffs Office                  |                     | 80-006667                  |                     |
| Gas Lot Number                                        | Gas Cylinder Number |                            | Gas Expiration Date |
| 26021080A1                                            | 028                 |                            | 10/05/2023          |

Check When Done:

- X 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. 0.080 AC
- B. 0.08 Q AC
- C. 0.0 8 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<br>11/05/2021 |
|-----------------------------------------|------------|--------------------|
| Reviewed By (Crime Laboratory Use Only) | Clina Etch | Date 11.5.2021     |

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

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-006667Location = GLDN8164.14.00 09/1611/05/202110:18

|                                                                                                       | DRY CAL CHECK                                               |                                                    |
|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|----------------------------------------------------|
| Test                                                                                                  | AC                                                          | Time                                               |
| 01 Room Air<br>02 Std. Gas<br>03 Room Air<br>04 Std. Gas<br>05 Room Air<br>06 Std. Gas<br>07 Room Air | 0.000<br>0.080<br>0.000<br>0.080<br>0.000<br>0.080<br>0.000 | 10:19<br>10:19<br>10:20<br>10:20<br>10:21<br>10:21 |

Lot No = 26021080A1 Cyl No = 28 Exp Date = 10/05/2023 County = 17

Oper No. = 130349

Operator Signature DEY MUCKLE

Remarks:

Form 106-18000



INTOXILYZER® RECORD ND OFFICE OF ATTORNEY GENERAL CRIME LABORATORY DIVISION SFN 50496 (05/2018)

|  |                            | Location<br>Golden Valley County Sheriffs Office |                                   |
|--|----------------------------|--------------------------------------------------|-----------------------------------|
|  | Gas Cylinder Number<br>028 |                                                  | Gas Expiration Date<br>10/05/2023 |

| Test Date  | Chemical Test<br>Operator Number | Operator's Name<br>(PRINT Last Name, First, MI) |
|------------|----------------------------------|-------------------------------------------------|
| 11/05/2021 | 130349                           | Muckle, Dey, J / ACA - New Gas Cylinder Install |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |
|            |                                  |                                                 |

AGENCY RETAIN AT INTOXILYZER® LOCATION