

Serial Number

80-006667

Instrument Location

Golden Valley County Sheriff's Office

Reason for Install/Repair

- 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 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. 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): N/A
- 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 (SFN504096, 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

*[Signature]*

Date

06-29-2022

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

*Janelle Pertschiller*

Certified Date

06/30/2022

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

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

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

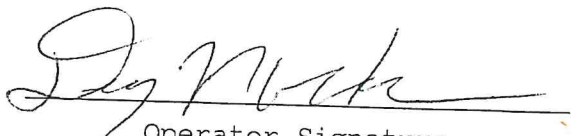
Current Instrument Setup

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 #?	26021080A1
Standard Cyl #?	28
Standard Expiration?	10/05/2023
Oper No?	130349

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

IR Calibration Date:	05/22/2020	
	3um                      9um	
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0th Coef(*100):	-22305	-20910
1st Coef(*100):	281966	134470
2nd Coef(*100):	1570	1173
H2O adj(mg/l*10k):	336	351

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

  
Operator Signature  
DEY MUCKLE

Remarks:

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:43
02 Std. Gas	0.080	16:43
03 Room Air	0.000	16:43
04 Std. Gas	0.080	16:44
05 Room Air	0.000	16:44
06 Std. Gas	0.080	16:45
07 Room Air	0.000	16:45

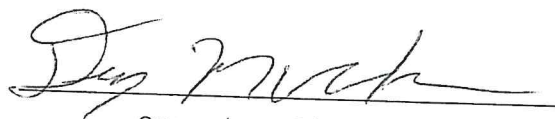
Lot No = 26021080A1

Cyl No = 28

Exp Date = 10/05/2023

County = 17

Oper No. = 130349



Operator Signature  
DEY MUCKLE

Remarks:

Test	AC	Time
01 Diagnostic	OK	16:50
02 Room Air	0.000	16:50
03 *Subject Test	0.000*	16:53
04 Room Air	0.000	16:56
05 Std. Gas	0.080	16:57
06 Room Air	0.000	16:58
07 *Subject Test	RFI**	16:59
08 Room Air	0.000	16:59

\*Deficient Sample - Value Printed was  
Highest Obtained  
\*\*Invalid Test  
Inhibited - RFI

Sub Name = INSTALL, TEST NEW  
 Sub DOB = 01/01/1900  
 Sub Sex = Male Weight = 199  
 Test = DUI Cit = TEST002  
 Dr. Lic. = ND/INSTALL  
 Lot No = 26021080A1  
 Cyl No = 28  
 Expiration Date = 10/05/2023  
 County = 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: