

**BREATH ALCOHOL EQUIPMENT
REPAIR AND MAINTENANCE**

Instrument: 9000 Serial Number: 80-003066 Location: TOXL

1. Instrument repairs/maintenance performed:

LAMOURE Co. S.O. noticed VOLTAGE CURRENT → FAIL during DIAGNOSTIC. Initial DIAGNOSTIC ON START/WARM UP was good. DIAGNOSTIC after Formsloop was good. Two DIAGNOSTIC test results were good. Battery may have discharged while AC power button was off and created the VOLTAGE CURRENT → FAIL. Will charge, discharge and re-charge battery to reset. Checked 0.020 AC & 0.150 AC simulator solutions and 0.020 AC & 0.100 AC gas standards and results ^{were} ~~were~~ good. See attached ACA checks. Testing was performed on 28th, 29th and 30th OF ^{CEC}JANUARY 2015.

2. Does the instrument require further testing? Yes or No
If Yes, continue.
If No, sign and date below.

3. If needed, set the time, date, and location. TIME

4. Does the flow need to be calibrated? Yes or No
If Yes, attach paperwork.

5. Does the optical bench need to be calibrated? Yes or No
If Yes, attach test records.

6. Does the gas regulator need to be calibrated? Yes or No
PSI gauge reading _____ PSI display reading _____

Set instrument to Wet Bath and run tests:

7. Low AC. Use < 0.03 AC in ACA mode. Attach test record. _____
Sim SN: _____ Lot #: _____ AC: _____

8. Linearity Test. Use ≥ 0.25 AC in ACA mode. Attach test record. _____
Sim SN: _____ Lot #: _____ AC: _____

Set instrument to Gas and run tests:

- 9. Print test. Attach test record. _____
- 10. Interferent Check. Use a 0.10 AC ethanol plus 0.05% acetone in ABA mode.
Attach test record. _____
Sim SN: _____ Lot #: _____ AC: _____
- 11. RFI Check. Run in CMS mode. Key radio during any room air or subject test.
Attach test record. _____
- 12. Calibration Check. Use a valid 0.080 AC Ethanol Gas Standard. Run three
calibration sets in ACA mode. Attach test records. _____

Lot No. _____ Cylinder No. _____ Expiration Date _____

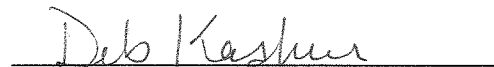
Test 1 _____	Test 1 _____	Test 1 _____
Test 2 _____	Test 2 _____	Test 2 _____
Test 3 _____	Test 3 _____	Test 3 _____

Average _____



Field Inspector's Signature

1/30/15
Date



Reviewed by

30 Jan 15
Date

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-003066
Location = TOXL 8164.13.00 06/09
01/29/2015 15:56

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:57
02 Std. Sol.	0.022	15:58
03 Room Air	0.000	15:58
04 Std. Sol.	0.022	15:59
05 Room Air	0.000	16:00
06 Std. Sol.	0.022	16:00
07 Room Air	0.000	16:01


08 Sim Temp = 34.0°C

Simul Ser No = DR3451

Std Sol No = 14240

County = 08

Oper No. = 666666



Operator Signature

CHARLES EDER

Remarks:

0.020 AC Sim. Sol.

Exp: 10/20/16 Lot: 14240 GUTH

Form 106-I8000

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

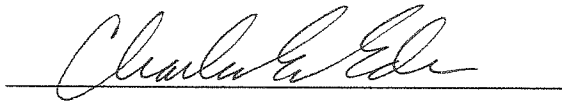
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-003066
Location = TOXL 8164.13.00 06/09
01/30/2015 09:50

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	09:50
02 Std. Sol.	0.150	10:05
03 Room Air	0.000	10:05
04 Std. Sol.	0.151	10:06
05 Room Air	0.000	10:07
06 Std. Sol.	0.152	10:07
07 Room Air	0.000	10:08

08 Sim Temp = 34.0°C

Simul Ser No = DR5188
Std Sol No = 13150
County = 08 Oper No. = 666666



Operator Signature
CHARLES EDER

Remarks: 0.150 AC Sim. Sol. GUTH
LOT: 13150 EXP: 6/11/15

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-003066
Location = TOXL 8164.13.00 06/09
01/29/2015 13:45

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:46
02 Std. Gas	0.021	13:46
03 Room Air	0.000	13:47
04 Std. Gas	0.021	13:47
05 Room Air	0.000	13:48
06 Std. Gas	0.021	13:48
07 Room Air	0.000	13:49

Lot No = 32114020A3
Cyl No = 1
Exp Date = 12/05/2016
County = 08 Oper No. = 666666



Operator Signature
CHARLES EDER

Remarks: 0.020 AC EGS

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-003066
Location = TOXL 8164.13.00 06/09
01/29/2015 15:30

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:30
02 Std. Gas	0.159	15:31
03 Room Air	0.000	15:31
04 Std. Gas	0.159	15:32
05 Room Air	0.000	15:32
06 Std. Gas	0.159	15:32
07 Room Air	0.000	15:33

Lot No = 28814160A1
Cyl No = 2
Exp Date = 11/05/2016
County = 08 Oper No. = 666666



Operator Signature
CHARLES EDER

Remarks: 0.160 AC EGS