

**INTOXILYZER® 5000 G AND 8000
INSTALLATION AND REPAIR CHECKOUT**

Serial No.: 80-004203 Instrument Location: HAATC-Rugby

Reason for Install/Repair: X Install After Lab Repair/Inspection
Other (specify) _____

Check When Done:

- A. Surge Protector Installed/Properly Grounded.
- B. Telephone Line Connected to Intoxilyzer® KB.
- C. Breath Tube Heated.
- D. Review/Enter Preliminary Data Entry (Level 2, Function E).
- E. Ethanol Breath Standard: Connected _____ Installed
(Include Form 105-G if New Cylinder Installed.)
- F. Review/Enter Gas Setup (Level 1, Function S). (Intoxilyzer® 80 Only.)
- G. Print Test (Level 1, Function P). (Attach Test Record.)
- H. ACA Test (Level 1, Function C). (Attach Test Record.)
- I. RFI Test (Use CMS Mode-First Room Air). (Attach Test Record.)
- J. Repair and/or Maintenance Performed: _____

5/7/11
Date
16 May 2011
Date

[Signature]
Field Inspector's Signature
Deb Kast
Reviewed By

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.
Certified By: [Signature] Certified Date: 29 NOV. 2016

80-004203
P. 118 of 121
[Signature]

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004203
Location = RUGB 8164.13.00 06/09
05/07/2011 14:00

***** Printer Test *****

abcdefghijklmnopqrstuvwxy1234567890-={
ABCDEFGHIJKLMNPOQRSTUVWXYZ!@#%^&*()_+?

abcdefghijklmnopqrstuvwxy1234567890-={
ABCDEFGHIJKLMNPOQRSTUVWXYZ!@#%^&*()_+?

Current Instrument Setup

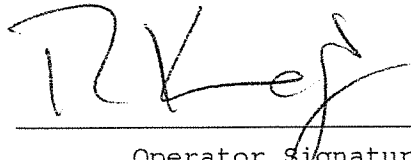
Data Entry Mode: Enabled
Start Test Sequence: DABACABA
Display Prelim Rslt? Yes
Display Third Digit? Yes
Inhib Printer(Y/N)? No
Display Volume? No
Disable On Memfull? Yes
of Print Copies? 1
Select Std (D/W/I)? Dry
Standard Value? 0.080
Standard Lot #? 659358
Standard Cyl #? 21
Standard Expiration? 09/03/2011
Oper No? 069108

Flow Cal. Date: 01/28/2010
Slope 719
Intercept -711903

IR Calibration Date: 01/28/2010
 3um 9um

0th Coef(*100): -17469 -28710
1st Coef(*100): 264216 135022
2nd Coef(*100): 2778 1081
H2O adj(mg/l*10k): 430 605

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



Operator Signature
ROBERT KENNEDY

Remarks:

Form 106-I8000

80-004203
p. 119 of 121
FM

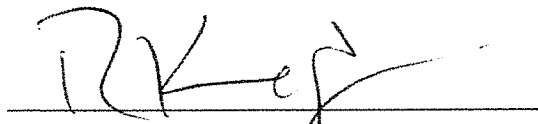
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004203
Location = RUGB 8164.13.00 06/09
05/07/2011 14:01

DRY CAL CHECK

| Test | AC | Time |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 14:02 |
| 02 Std. Gas | 0.082 | 14:02 |
| 03 Room Air | 0.000 | 14:03 |
| 04 Std. Gas | 0.081 | 14:03 |
| 05 Room Air | 0.000 | 14:04 |
| 06 Std. Gas | 0.081 | 14:04 |
| 07 Room Air | 0.000 | 14:05 |

Lot No = 659358
Cyl No = 21
Exp Date = 09/03/2011
County = 35 Oper No. = 069108


Operator Signature
ROBERT W. KENNEDY

Remarks:

Form 106-I8000

80-007203
P. 120 of 121
RM

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

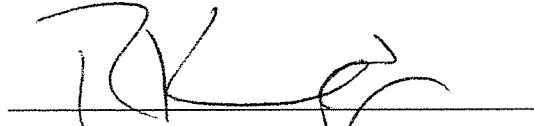
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004203
Location = RUGB 8164.13.00 06/09
05/07/2011 14:05

| Test | AC | Time |
|---------------|------|-------|
| 01 Diagnostic | OK | 14:07 |
| 02 Room Air | RFI* | 14:08 |
| 03 Room Air | RFI* | 14:08 |

*Invalid Test
Inhibited - RFI

Sub Name = TEST, SUBJECT NA
Sub DOB = 01/01/1955
Sub Sex = Male Weight = 212
Test = DUI Cit = 888888
Dr. Lic. = ND/TES557867
Lot No = 659358
Cyl No = 21
Expiration Date = 09/03/2011
County = 35 Oper No. = 069108

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



Operator Signature
ROBERT W. KENNEDY

Remarks:

Form 106-I8000

80-004203
P. 121 of 121
KM