



INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT
 OFFICE OF ATTORNEY GENERAL
 CRIME LABORATORY DIVISION
 Toxicology Section/Breath Alcohol Program
 SFN 59281 (03-2014)

Serial Number <i>80-005954</i>	Instrument Location <i>DFDLPD Lake Region Corr. Ctr. Ransom CO SO</i>
Reason for Install/Repair <input checked="" type="checkbox"/> Install After Receiving From Crime Laboratory <input type="checkbox"/> Install After Location Change <input type="checkbox"/> Other (Specify) _____	

Check When Done:

- 1. Surge Protector Installed/Properly 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. RFI Test (CMS Mode or Level 1, Function B or C; Key Radio During Test).
- 7. Repair and/or Maintenance Performed (if Any): *intox install*
- 8. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the Intoxilyzer® for Use.
- N/A* 9. File Previous Intoxilyzer® Record (SFN50496, 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 <i>Deb Koshur</i>	Date <i>18 May 15 ✓</i>
Reviewed By (Crime Laboratory Use Only) <i>Charles E. Edin</i>	Date <i>20 MAY 15</i>

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: *Charles E. Edin* Certified Date: *21 Nov. 2016*

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-005954
Location = DEVL 8164.13.00 06/09
05/18/2015 15:52

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

abcdefghijklmnopqrstuvwxy1234567890-|=|
ABCDEFGHIJKLMNopqrstuvwxyz!@#%&^*()_+?

abcdefghijklmnopqrstuvwxy1234567890-|=|
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 #? 13314080A3
Standard Cyl #? 36
Standard Expiration? 06/05/2016
Oper No? 777777

Flow Cal. Date: 05/09/2014
Slope 647
Intercept -668435

IR Calibration Date: 05/12/2015
 3um 9um

	3um	9um
0th Coef(*100):	-16063	-18509
1st Coef(*100):	275605	134398
2nd Coef(*100):	3207	1457
H2O adj(mg/l*10k):	331	423

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

Deb Kashur
Operator Signature
DEB KASHUR

Remarks:

Print test

Form 106-I8000

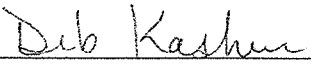
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

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North Dakota Model 8000 SN 80-005954
Location = DEVL 8164.13.00 06/09
05/18/2015 15:53

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:53
02 Std. Gas	0.080	15:54
03 Room Air	0.000	15:54
04 Std. Gas	0.079	15:55
05 Room Air	0.000	15:55
06 Std. Gas	0.078	15:55
07 Room Air	0.000	15:56

Lot No = 13314080A3
Cyl No = 36
Exp Date = 06/05/2016
County = 36 Oper No. = 777777



Operator Signature
DEB KASHUR

Remarks:

calibration check 0.080 AC

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-005954
Location = DEVL 8164.13.00 06/09
05/18/2015 15:57

Test	AC	Time
01 Diagnostic	OK	15:58
02 Room Air	RFI*	15:58
03 Room Air	0.000	15:59

*Invalid Test
Inhibited - RFI

Sub Name = DISCOVER, THE SPIRIT
Sub DOB = 02/01/1992
Sub Sex = Female Weight = 150
Test = DUI Cit = NA
Dr. Lic. = ND/DIS921456
Lot No = 13314080A3
Cyl No = 36
Expiration Date = 06/05/2016
County = 36 Oper No. = 777777

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

Deb Kasher
Operator Signature
DEB KASHUR

Remarks:

RF 1 check

Form 106-I8000