



INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT
 OFFICE OF ATTORNEY GENERAL
 CRIME LABORATORY DIVISION
 Toxicology Section/Breath Alcohol Program
 SFN 59281 (5-2011)

Serial Number <i>80 002666</i>	Instrument Location <i>Stinson DSC</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 (Use CMS Mode; Key Radio During First Room Air).
- 7. Repair and/or Maintenance Performed (if Any): _____
- 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 (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>[Signature]</i>	Date <i>5-26-11</i>
Reviewed By (Crime Laboratory Use Only) <i>Deb Kashner</i>	Date <i>01 June 2011</i>

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-002666
Location = ~~DIX~~ *DKPD* 8164.13.00 06/09
05/26/2011 *DK* 16:18
01. Wallace

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:19
02 Std. Gas	0.078	16:19
03 Room Air	0.000	16:19
04 Std. Gas	0.079	16:20
05 Room Air	0.000	16:20
06 Std. Gas	0.079	16:21
07 Room Air	0.000	16:21

Lot No = 15410080A1
Cyl No = 20
Exp Date = 07/01/2012
County = 45 Oper No. = 068332


Operator Signature
DAVID M. WALLACE

Remarks:

Form 106-I8000

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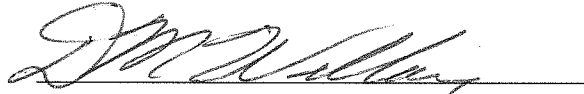
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-002666
Location = DKPD 8164.13.00 06/09
05/26/2011 16:23

Test	AC	Time
01 Room Air	RFI*	16:25
02 Room Air	0.000	16:26

*Invalid Test
Inhibited - RFI

Sub Name = DOE, JOHN NA
Sub DOB = 06/09/1950
Sub Sex = Male Weight = 256
Test = DUI Cit = 1
Dr. Lic. = ND/DOE561234
Lot No = 15410080A1
Cyl No = 20
Expiration Date = 07/01/2012
County = 45 Oper No. = 068332



Operator Signature
DAVID M. WALLACE

Remarks:

Form 106-I8000

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