

**BREATH ALCOHOL INSTRUMENT CHAIN OF CUSTODY WORKSHEET**

Instrument: 8000 Serial Number: 80-003061

Transported Out of the Crime Laboratory:

Agency Being Assigned Instrument: \_\_\_\_\_

Name/Agency of Person Transporting Instrument:

\_\_\_\_\_ (Print Name) \_\_\_\_\_ (Print Agency)

Signature of Person Receiving Instrument: \_\_\_\_\_

Date Receiving Instrument: \_\_\_\_/\_\_\_\_/\_\_\_\_ From: \_\_\_\_\_

Or Shipped Via:

USPS \_\_\_\_ UPS \_\_\_\_ FedEx \_\_\_\_ Other \_\_\_\_\_

Date Sending Instrument: \_\_\_\_/\_\_\_\_/\_\_\_\_ Air Bill No. \_\_\_\_\_

Complete Air Bill (Identify Instrument/Serial Number) and attach a copy to this worksheet.

Transported to the Crime Laboratory:

Agency Returning Instrument: \_\_\_\_\_

Name/Agency of Person Returning Instrument:

\_\_\_\_\_ (Print Name) \_\_\_\_\_ (Print Agency)

Signature of Person Returning Instrument: \_\_\_\_\_

Date Returning Instrument: \_\_\_\_/\_\_\_\_/\_\_\_\_ Received By: \_\_\_\_\_

Or Received Via:

USPS \_\_\_\_ UPS \_\_\_\_ FedEx  Other \_\_\_\_\_

Date Receiving Instrument: 22 July 2010 Air Bill No. no paperwork

Attach shipping paperwork (if any) to this worksheet.

Instrument Transfer Information Entered Into the Equipment Database:

Date of Action 22 July 2010 By: Deb Kashner

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FM

INTOX  
PBT  
TOXITEST

DATE	7-1-10
RECEIVED VIA	FEDX

# CMI INC.

316 E. 9th St., Owensboro, KY 42303  
270-685-6200 — Fax 270-685-6288  
1-800-835-0690

# SERVICE WORK ORDER

324335

**B I L L T O**

ATTN: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CUSTOMER NO. 585052

PHONE \_\_\_\_\_

**S H I P T O**

*Office of Attorney General*

ATTN: *Crime Lab Division*

*2641 E. Main Avenue*

*Margy Pearson*

CITY *Bismarck* STATE *ND* ZIP *58501*

PHONE *701-338-6159*

MODEL # <i>8000</i>	S/N <i>80-003061</i>	DATE RCVD.	P.O. #	REQ.	BILL CODE <i>EW</i>	SERVICE LOCATION CODE
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PROD. CODE	EXTRA PARTS RCVD. <i>BT gas box, lube</i>
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DESCRIPTION OF PROBLEM *Det Problems, sim 110 head .080, GAS S/H .080 head 0.00, had to Press*

QUOTE      WARRANTY  SERVICE DEPT.  NEW

PRELIMINARY TEST     DISMANTLE, INSPECT, DIAGNOSTIC TEST *Start Test Several Times to Start Test*

POWER SUPPLY     TEST, INSPECT     REPLACE

MAIN PWB's - REMOVE & CLEAN, REINSTALL, TEST

PWB's     DIAGNOSE, REPAIR     REPLACE

PWB's - SURFACE CLEAN IN PLACE

FILTER WHEEL - REMOVE, CLEAN, REINSTALL, CHECK CELL INTERIOR

CHOPPER WHEEL MOTOR     TEST & INSPECT     REPLACE

CELL - REMOVE, CLEAN, REINSTALL, REPLACE LENSES/GASKETS REQ'D

IR LIGHT SOURCE     REMOVE, REALIGN     REPLACE

PRINTER ASSY.     DISASSEMBLE     CLEAN & LUBRICATE

REMOVE & REPLACE BELT     REALIGNMENT

REPLACE     TEST PRINTER FUNCTIONS

BATTERIES - REPLACE     CPU     RAM

REPLACE PARTS     REASSEMBLE     CALIBRATION     FINAL TEST

MISC. \_\_\_\_\_

PBT  PRELIMINARY TESTING - PRESSURE, BATTERY, ZERO SET

DISASSEMBLE     REPLACE PARTS     REASSEMBLE

TEST     CALIBRATE     FINAL TEST

TOXITEST  INCOMING LEAK TEST     VISUAL/MECH. INSPECTION

TEST THERMOMETER & THERMOSTAT     DISASSEMBLE

REPLACE PARTS     REASSEMBLE     OUTGOING & LEAK TEST

FINAL TEST

MISC. \_\_\_\_\_

PARTS USED			
QTY	ID NO.	DESCRIPTION	CODE
1	340208	check valve	

COMMENTS: *Repaired Pecanal (Det)*  
*Cleaned cell, replaced parts listed*

HOURS: *4.0 HR*

TECH. *R A* DATE *7/14/10* CAL TECH. *DR* DATE *7/15/10*

SHIPPING DATE/CHARGES

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*AN*

FORM # CMI 8W0 1 REV (-)

SPECIAL SHIPPING INSTRUCTIONS

COD     AMOUNT \$ \_\_\_\_\_

# CERTIFICATE OF CALIBRATION

This is to certify that the calibration of INTOXILYZER serial number 80-003061, manufactured by CMI, subsidiary of MPD, Inc. of Owensboro, Kentucky, was tested and found to be in compliance with the National Highway Traffic Safety Administration Standard for Devices to Measure Breath Alcohol (F.R., No. 179 48705-48710 Sept. 17, 1993). Calibration solutions are traceable to NIST (NBS) standard material 1828.

Date 7.15.10 Signed Del Palmer  
Technician

**EMI** INC.

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316 EAST 9TH STREET  
OWENSBORO, KY 42303

CMI-304 5m5/1/95