

BREATH ALCOHOL INSTRUMENT CHAIN OF CUSTODY WORKSHEET

Instrument: 8006 Serial Number: 80-004949

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: factory

Name/Agency of Person Returning Instrument:

(Print Name) _____ (Print Agency)

Signature of Person Returning Instrument: _____

Date Returning Instrument: ____/____/____ Received By: unknown

Or Received Via:
USPS ____ UPS ____ FedEx X Other _____

Date Receiving Instrument: 01/0ct/2010 Air Bill No. N/A

Attach shipping paperwork (if any) to this worksheet.

Instrument Transfer Information Entered Into the Equipment Database:

Date of Action 01/0ct/2010 By: Debo Keshu

80-004949
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JCH

INTOX
PBT
TOXITEST

DATE	9-30-10
RECEIVED VIA	FELIX

CMI INC.

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

SERVICE WORK ORDER

325018

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ATTN:		
CITY STATE ZIP		
CUSTOMER NO. 585013		
PHONE		

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ATTN: Midge, Pearson		
2641 E. Main Avenue		
CITY	STATE	ZIP
Bismarck	ND	58501
PHONE 701-328-1659		

MODEL # 8000	S/N 80-004949	DATE RCVD.	P.O. #	REQ.	BILL CODE 3	SERVICE LOCATION CODE
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PROD. CODE	EXTRA PARTS RCVD. PC, gas, BT, Battery
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DESCRIPTION OF PROBLEM Giving RT clock fails	<input type="checkbox"/> QUOTE	<input type="checkbox"/> WARRANTY <input type="checkbox"/> SERVICE DEPT. <input type="checkbox"/> NEW
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- PRELIMINARY TEST DISMANTLE, INSPECT, DIAGNOSTIC 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

COMMENTS: Resoldered pins on 426, 432, 411
Cleaned cell, Reloaded software

BT Seal # 03605

HOURS:	TECH. K. R. L.	DATE 9/22/10	CAL. TECH.	DATE
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FORM # CMI 8WO 1 REV (-)

SHIPPING DATE/CHARGES	80-004949 P. 53/54
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SPECIAL SHIPPING INSTRUCTIONS

COD AMOUNT \$

Certificate of Calibration

Intoxilyzer® 8000

This is to certify that the calibration of Intoxilyzer® serial number 80-004949, manufactured by CMI Inc., a 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) and with International Recommendation OIML R126 Edition 1998 (E). Calibration solutions are traceable to NIST standard material 1828.

Date 9/24/10

Signed

D. D. Palmer

Technician

CMI INC.

80-004949

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316 East 9th Street
Owensboro, KY 42303
USA

Part No. 650519 CMI 7/9/09