

✓ Database  
CME

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

Serial No.: 80-004197 Instrument Location: WASH

Reason for Install/Repair: \_\_\_\_\_ Install After Lab Repair/Inspection  
 Other (specify) New install

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® 8000 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: \_\_\_\_\_

10/08/2009  
Date  
14 Oct 09  
Date

Richard D. Johnson  
Field Inspector's Signature  
Deb Keshler  
Reviewed By



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

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-004197  
Location = WASH      8164.12.00 06/09  
10/08/2009      16:29

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:30
02 Std. Gas	0.082	16:30
03 Room Air	0.000	16:31
04 Std. Gas	0.082	16:31
05 Room Air	0.000	16:32
06 Std. Gas	0.081	16:32
07 Room Air	0.000	16:33

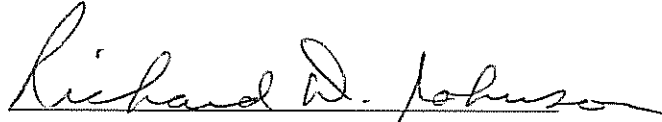
Lot No = 659357

Cyl No = 47

Exp Date = 09/03/2011

County = 28

Oper No. = 118707



Operator Signature  
RICHARD D. JOHNSON

Remarks:

Form 106-I8000

80-004197  
P. 3 of 4 FL

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

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-004197  
Location = WASH      8164.12.00 06/09  
10/08/2009      16:35

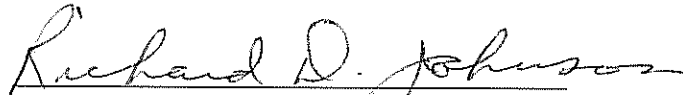
Test	AC	Time
01 Diagnostic	OK	16:37
02 Room Air	RFI*	16:37
03 Room Air	RFI*	16:37

\*Invalid Test  
Inhibited - RFI

Sub Name = TEST, SUBJECT NA  
Sub DOB = 07/03/1962  
Sub Sex = Male      Weight = 180  
Test = OTH      Cit = NA  
Dr. Lic. = ND/NA  
Lot No = 659357  
Cyl No = 47

Expiration Date = 09/03/2011  
County = 28      Oper No. = 118707

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



Operator Signature  
RICHARD D. JOHNSON

Remarks:

Form 106-I8000

80-004197  
P 4/4 FL