



ETHANOL GAS STANDARD CYLINDER REPORT

OFFICE OF ATTORNEY GENERAL

CRIME LABORATORY DIVISION

Toxicology Section/Breath Alcohol Program

SFN 59282 (10-2013)

Chemical Test Operator Name (Print) <i>Jeremy R. Beahs</i>		
Location <i>Burke Co. Sheriff's Office</i>		Intoxilyzer® Serial Number <i>80-004942</i>
Gas Lot Number <i>17316080A2</i>	Gas Cylinder Number <i>36</i>	Gas Expiration Date <i>8-5-18</i>

Check When Done:

1. Scan/Enter Gas Cylinder Information (Level 1, Function S).

2. Perform an ACA Test (Level 1, Function C).

Write in the ACA Test Results (Reported to 3 Digits, Ex. 0.081).

A. 0.084 AC

B. 0.085 AC

C. 0.085 AC

3. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the Intoxilyzer® for Use.

4. File Previous Intoxilyzer® Record (SFN50496, Form 120-G) at the Intoxilyzer® Location at the Agency.

5. Send the Following to the Crime Laboratory:

A. Ethanol Gas Standard Cylinder Report (SFN59282, Form 105-G).

B. ACA Test Record.

Chemical Test Operator Signature <i>Jeremy R. Beahs</i>	Date <i>10/5/17</i>
Reviewed By (Crime Laboratory Use Only) <i>Roberta Henger-Humma</i>	Date <i>10/25/17</i>


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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004942
Location = BURK 8164.13.00 06/09
10/05/2017 12:39

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	12:40
02 Std. Gas	0.084	12:40
03 Room Air	0.000	12:41
04 Std. Gas	0.085	12:41
05 Room Air	0.000	12:42
06 Std. Gas	0.085	12:42
07 Room Air	0.000	12:42

Lot No = 17316080A2
Cyl No = 36
Exp Date = 08/05/2018
County = 07 Oper No. = 130230



Operator Signature
JEREMY GROHS

Remarks:

Good Test

Form 106-I8000

I certify that the attached is a true and correct copy of the Intoxilyzer test record.

Print Name and Badge # Jeremy Grohs 4170
Signature 
Date 10/5/17