



ETHANOL GAS STANDARD CYLINDER REPORT
 NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
 CRIME LABORATORY DIVISION-TOXICOLOGY SECTION/BREATH ALCOHOL PROGRAM
 SFN 59282 (08/2018)

Chemical Test Operator Name (Print) <i>RHOADES, HUNTER</i>		
Location <i>DCSO Dunn Co SO 12/26/18 205 OWENS ST. MANNING, ND, 58642</i>	Intoxilyzer® Serial Number <i>80-005955</i>	
Gas Lot Number <i>17618080A3</i>	Gas Cylinder Number <i>068</i>	Gas Expiration Date <i>08/05/2020</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. *0.083* AC
 - B. *0.084* AC
 - C. *0.081* 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>[Signature]</i>	Date <i>12/26/18</i>
Reviewed By (Crime Laboratory Use Only) <i>[Signature]</i>	Date <i>12/26/18</i>

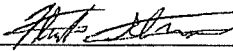
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-005955
Location = DUNN 8164.14.00 09/16
12/26/2018 08:38

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	08:39
02 Std. Gas	0.083 ✓	08:39
03 Room Air	0.000	08:40
04 Std. Gas	0.084 ✓	08:40
05 Room Air	0.000	08:40
06 Std. Gas	0.084 ✓	08:41
07 Room Air	0.000	08:41

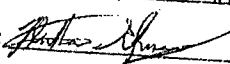
Lot No = 17618080A3
Cyl No = 68
Exp Date = 08/05/2020
County = 13 Oper No. = 130635



Operator Signature
HUNTER RHOADES

Remarks: 105 - G COMPLETED

Form 106-I8000

I certify that the attached is a true and correct copy of the intoxilyzer test record.
Print Name/Badge #: HUNTER RHOADES / 3261
Signature: 
Date: 12/26/18 Dept: DUNN COUNTY S.O.