



INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT
 NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
 CRIME LABORATORY DIVISION-TOXICOLOGY SECTION/BREATH ALCOHOL PROGRAM
 SFN 59281 (06/2018)

Serial Number PO-006498	Instrument Location Minot police Dept
Reason for Install/Repair	
<input checked="" type="checkbox"/> Install After Receiving From Crime Laboratory <input type="checkbox"/> Install After Location Change <input type="checkbox"/> Other (Specify) _____	

Check When Done:

- 1. Surge Protector Installed/Property Grounded.
- 2. Telephone Line Connected to Intoxilyzer® 8000.
- 3. Breath Tube Heated.
- 4. Enter Preliminary Data (i.e. Date, Time, DST (Y), and Location; Level 2, Function E).
- 5. Scan/Enter Gas Cylinder Information (Level 1, Function S).
- 6. Run Tests:
 - A. Print Test (Level 1, Function P).
 - B. ACA Test (Level 1, Function C).
 - C. Radio Frequency Interference (RFI) Test (CMS Mode or Level 1, Function B or C; Key Radio During Test).
- 7. Repair and/or Maintenance Performed (if any): _____
- 8. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the Intoxilyzer® for Use.
- 9. File Previous Intoxilyzer® Record (SFN504096, Form 120-G) at the Intoxilyzer® Location at the Agency.
- 10. Send the Following to the Crime Laboratory: Completed Intoxilyzer® 8000 Installation and Repair Checkout (SFN59281, Form 104-G), Print Test, ACA Test, and RFI Test.

Field Inspector Signature [Signature] 43617893	Date 06-08-2020
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Crime Laboratory Use Only

This installation has been reviewed and the instrument is approved to be used for the analysis of breath to determine alcohol concentration from the date the Field Inspector performed the installation. This record on file at the Office of Attorney General, Crime Laboratory Division, in the County of Burleigh, North Dakota, is certified to be a true and correct copy of the documents received.

Reviewed/Certified By [Signature]	Certified Date 6-15-2020
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NOTE: INSTALLATION DATE FOR THIS INTOXILYZER INSTRUMENT WILL BE 6-12-2020. THIS IS DUE TO A PROPER ACA TEST PERFORMED ON 6-12-2020 AND SIGNED BY FIELD INSPECTOR.

[Signature]
6-15-2020

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006498
Location = MIPD 8164.14.00 09/16
06/08/2020 15:55

***** Printer Test *****

abcdefghijklmnopqrstuvwxyz1234567890-=
ABCDEFGHIJKLMNopQRSTUVWXYZ!@#\$\$%^&*()_+?

abcdefghijklmnopqrstuvwxyz1234567890-=
ABCDEFGHIJKLMNopQRSTUVWXYZ!@#\$\$%^&*()_+?

Current Instrument Setup

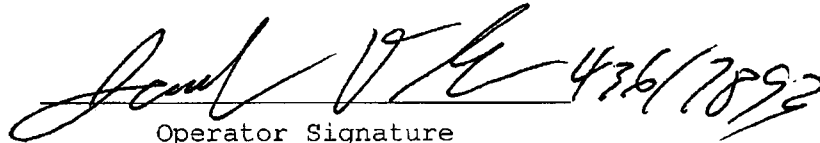
Data Entry Mode: Enabled
Start Test Sequence: DABACABA
Display Prelim Rslt? Yes
Display Third Digit? Yes
Inhib Printer(Y/N)? No
Display Volume? No
Disable On Memfull? Yes
of Print Copies? 1
Select Std (D/W/I)? Dry
Standard Value? 0.080
Standard Lot #? 24119080A1
Standard Cyl #? 19
Standard Expiration? 11/05/2021
Oper No? 130907

Flow Cal. Date: 08/18/2015
Slope 669
Intercept -637469

IR Calibration Date: 08/18/2015

	3um	9um
0th Coef(*100):	-28161	-22508
1st Coef(*100):	286657	143843
2nd Coef(*100):	2341	1281
H2O adj(mg/l*10k):	776	451

***** Printer Test End *****



Operator Signature
JACOB OLSON

Remarks:

Form 106-I8000

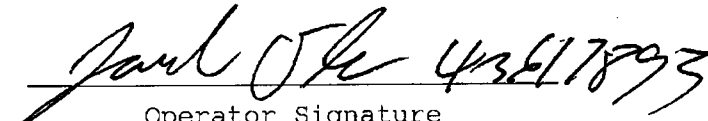
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006498
Location = MIPD 8164.14.00 09/16
06/08/2020 16:19

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:20
02 Std. Gas	0.000	16:20
03 Room Air	0.000	16:21
04 Std. Gas	0.000	16:21
05 Room Air	0.000	16:22
06 Std. Gas	0.000	16:22
07 Room Air	0.000	16:22

Lot No = 24119080A1
Cyl No = 19
Exp Date = 11/05/2021
County = 51 Oper No. = 130907


Operator Signature
JACOB OLSON

Remarks:

Form 106-I8000


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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006498
Location = MIPD 8164.14.00 09/16
06/08/2020 16:24

Test	AC	Time
01 Room Air	0.000	16:26
02 *Subject Test	RFI*	16:26
03 Room Air	0.000	16:27

*Invalid Test
Inhibited - RFI

Sub Name = OLSON, JACOB MARTIN
Sub DOB = 03/20/1983
Sub Sex = Male Weight = 230
Test = DUI Cit = 0000000000
Dr. Lic. = ND/OLS839200
Lot No = 24119080A1
Cyl No = 19
Expiration Date = 11/05/2021
County = 51 Oper No. = 130907


Operator Signature
JACOB OLSON

43617893

Remarks:

Form 106-I8000

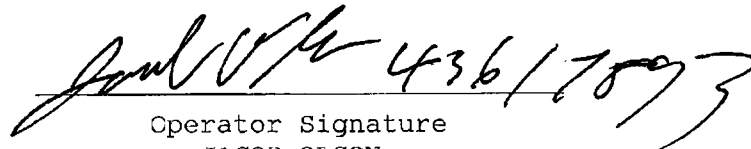
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006498
Location = MIPD 8164.14.00 09/16
06/12/2020 21:13

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	21:13
02 Std. Gas	0.081	21:14
03 Room Air	0.000	21:14
04 Std. Gas	0.080	21:15
05 Room Air	0.000	21:15
06 Std. Gas	0.081	21:16
07 Room Air	0.000	21:16

Lot No = 24119080A1
Cyl No = 19
Exp Date = 11/05/2021
County = 51 Oper No. = 130907


Operator Signature
JACOB OLSON

Remarks:

Form 106-I8000