

## 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   Instrument Location   Cass Co. Jail				
Reason for Install/Repair				
Install After Receiving From Crime Laboratory  Install After Location Change				
□ Other (Specify) (Annual Inspection)				
Check When Done:				
1. Surge Protector Installed/Property Grounded.				
⅓ 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 (Level1, 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 Ir	ntoxilyzer® 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 C 104-G), Print Test, ACA Test, and RFI Test.	heckout (SFN59281, Form			
Field Inspector Signature 356/	Date 06   18   2020			
Chad Thompson Crime Laboratory Use Only	. ,			
This installation has been reviewed and the instrument is approved to be used for the analysis of breath to deter the date the Field Inspector performed the installation. This record on file at the Office of Attorney General, Crim County of Burleigh, North Dakota, is certified to be a true and correct copy of the documents received.				
Reviewed/Certified By	Certified Date			

FORM 104-G

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006496
Location = CASS 8164.13.00 06/09
06/18/2020 15:02

\*\*\*\*\*\*\* Printer Test \*\*\*\*\*\*\*\*

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

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

Current Instrument Setup Data Entry Mode: Enabled Start Test Sequence: DABACABA Display Prelim Rslt? Yes Yes Display Third Digit? 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 #? 17618080A3 Standard Cyl #? 73 08/05/2020 Standard Expiration? 050910 Oper No?

Flow Cal. Date: 01/29/2020 Slope 663 Intercept -706121

TR Calibration Date: 08/18/2015

3um 9um

Oth Coef(\*100): -22081 -15963

1st Coef(\*100): 278490 136818

2nd Coef(\*100): 2086 1282

H2O adj(mg/l\*10k): 598 386

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

Operator Signature CHAD THOMPSON

Remarks:

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Form 106-I8000

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

CMI, Inc. Intoxilyzer North Dakota Model 8000 Location = CASS 06/18/2020 Alcohol Analyzer SN 80-006496 8164.13.00 06/09 15:02

## DRY CAL CHECK

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

Lot No = 17618080A3

Cyl No = 73

Exp Date = 08/05/2020

County = 09

Oper No. = 050910

Operator Signature CHAD THOMPSON

Remarks:

ACA Text

Form 106-I8000

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

CMI, Inc. Intoxilyzer North Dakota Model 8000 Location = CASS 06/18/2020

Alcohol Analyzer SN 80-006496 8164.13.00 06/09 15:06

Te	st	AC	Time
02	Room Air	0.000	15:08
	*Subject Test	RFI*	15:08
	Room Air	0.000	15:09

\*Invalid Test Inhibited - RFI

Sub Name = RFI TEST, RFI TEST RFI TEST

Sub DOB = 06/18/2000

Sub Sex = Male

Weight = 1Cit = RFI TEST Test = DUI

Dr. Lic. = ND/RFI TEST

Lot No = 17618080A3

Cyl No = 73

Expiration Date = 08/05/2020

County = 09

Oper No. = 050910

Operator Signature CHAD THOMPSON

Remarks:

Form 106-I8000