OFFICE OF ATTORNEY GENERAL CRIME LABORATORY DIVISION

Toxicology Section/Breath Alcohol Program Intoxilyzer® 8000 Inspection

INTOXILYZER® 8000 INSPECTION

Intoxi	ilyzer® 8000 Serial Number: <u>80-00 495</u> 4	Location: 70XL
Α.	General Setup and Checks: 1. Diagnostic Tests Pass and Instrument in Recognition 2. Breath tube heated 3. Date, time and location code (Level 2,E). For the set of	Re-set if necessary. record. egulator within 50 psi.
B.	Tests (Sign and attach test records): Configure simulator for the following tests (Level 1): Wet Calibration Check a.	0.03 AC: <u>0.020</u> AC Exp. Date: <u>2.13.2</u> 2 ≥ 0.25 AC: <u>0.300</u> AC
DR3	Configure dry gas standard for the following tests 2. Interferent Check (Level 1,B): Known Value (1847) Sim. Ser #: PRSTTT Lot #: TCSC Exp (2847) Display reads "Interferent Detect" 3. PRFI Check (CMS Mode) Display reads "Interferent Detect" 4. Dry Calibration Check (Level 1,C): Known Gas Cyl Lot #: 0262/0804/1 Cyl #: 26 Test 1 0.080 Test 4 0.080 Test 2 0.080 Test 5 0.080 Average 0.080	e: <u>0, /0</u> AC + 0.05% Acetone . Date: <u> </u>
C.	Remarks/Maintenance: <u>ANNUAL INSPE</u>	CTTON
	strument is acceptable to be used in the field.	6/7/21
Breat	th Analyst Signature	Date / / / / / / / / / / / / / / / / / / /
Revie	ewed by	Date

02/18

CMI, Inc. Intoxilyzer Alcohol Analyzer North Dakota Model 8000 SN 80-004954 8164.14.00 09/16 Location = TOXL 06/07/2021 15:40

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

abcdefqhijklmnopgrstuvwxyz1234567890-= ABCDEFGHIJKLMNOPQRSTUVWXYZ!@#\$%^&*() +?

abcdefqhijklmnopqrstuvwxyz1234567890-= 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? Select Std (D/W/I)? Dry Standard Value? 0.080 Standard Lot #? 02621080A1 Standard Cyl #? 26 Standard Expiration? 03/05/2023 Oper No? 666666

Flow Cal. Date: 08/27/2012 Slope 670 -570610 Intercept

IR Calibration Date: 05/31/2017

Oth Coef(*100): -18765 -20238 1st Coef(*100): 256075 2nd Coef(*100): 2112 130805 1219 H2O adj(mg/l*10k): 442

3um

9um

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

Operator Signature CHARLES EDER

Remarks:

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
06/07/2021

SN 80-004954 8164.14.00 09/16 15:47

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:48
02 Std. Sol.	0.018	15:49
03 Room Air	0.000	15:49
04 Std. Sol.	0.019	15:50
05 Room Air	0.000	15:50
06 Std. Sol.	0.018	15:51
07 Room Air	0.000	15:52

 $08 \text{ Sim Temp} = 34.0^{\circ}\text{C}$

Simul Ser No = MP3064 Std Sol No = 20070

County = 08

Oper No. = 666666

Operator Signature CHARLES EDER

LOW AC

Remarks:

Form 106-I8000

0.020 AC

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
06/07/2021

SN 80-004954 8164.14.00 09/16 16:00

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:00
02 Std. Sol.	0.297	16:01
03 Room Air	0.000	16:01
04 Std. Sol.	0.297	16:02
05 Room Air	0.000	16:03
06 Std. Sol.	0.296	16:03
07 Room Air	0.000	16:04

 $08 \text{ Sim Temp} = 34.0^{\circ}\text{C}$

Simul Ser No = MP5317 Std Sol No = 202012A

County = 08

Oper No. = 666666

ALIBRATION CHECK

Operator Signature CHARLES EDER

Remarks:

0.300 AC Form 106-18000 H16H AC

CMI, Inc. Intoxilyzer Alco North Dakota Model 8000 Location = TOXL 8164 06/07/2021

Alcohol Analyzer SN 80-004954 8164.14.00 09/16 16:09

Test	AC	Time
01 Room Air	0.000	16:09
02 *Subject Test 03 Room Air	INT* 0.000	16:10 16:11

*Invalid Test

Interferent Detected

Sub Name = TEST, DONOR2 NONE

Sub DOB = 07/25/1998

Sub Sex = Male

Weight = NA

Test = DUI

Cit = INTERFERENT

Dr. Lic. = ND/TES989643

Lot No = 02621080A1

Cyl No = 26

Expiration Date = 03/05/2023

County = 08

Oper No. = 666666

Operator Signature CHARLES EDER

Remarks:

0.10AC + 0.05%. ACETO,

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004954
Location = TOXL 8164.14.00 09/16
06/07/2021 16:30

Test	AC	Time
01 Diagnostic	OK	16:31
02 Room Air	0.000	16:31
03 Subject Test 1	0.000	16:32
04 Room Air	0.000	16:34
05 Std. Gas	0.078	16:35
06 Room Air	0.000	16:36
07 *Subject Test	RFI*	16:37
08 Room Air	0.000	16:37

*Invalid Test Inhibited - RFI

Sub Name = TEST, DONOR2 NONE

Sub DOB = 07/25/1998

Sub Sex = Male Weight = NA
Test = DUI Cit = RFI CHECK

Dr. Lic. = ND/TES989643

Lot No = 02621080A1

Cyl No = 26

Expiration Date = 03/05/2023

County = 08 Oper No. = 666666

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

Operator Signature CHARLES EDER

Remarks:

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
06/07/2021

Alcohol Analyzer SN 80-004954 8164.14.00 09/16 16:44

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:44
02 Std. Gas	0.080	16:45
03 Room Air	0.000	16:45
04 Std. Gas	0.080	16:45
05 Room Air	0.000	16:46
06 Std. Gas	0.080	16:46
07 Room Air	0.000	16:47

Lot No = 02621080A1

Cyl No = 26

Exp Date = 03/05/2023

County = 08

Oper No. = 666666

Operator Signature CHARLES EDER

Remarks:

Form 106-I8000

0.080 AC

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
06/07/2021

SN 80-004954 8164.14.00 09/16 16:47

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:48
02 Std. Gas	0.080	16:48
03 Room Air	0.000	16:49
04 Std. Gas	0.081	16:49
05 Room Air	0.000	16:50
06 Std. Gas	0.080	16:50
07 Room Air	0.000	16:50

Lot No = 02621080A1

Cyl No = 26

Exp Date = 03/05/2023

County = 08

Oper No. = 666666

Operator Signature CHARLES EDER

Remarks:

AUBRATION CAECK 0.080 AC FORM 106-18000

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
06/07/2021

SN 80-004954 8164.14.00 09/16 16:51

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:51
02 Std. Gas	0.080	16:52
03 Room Air	0.000	16:52
04 Std. Gas	0.081	16:52
05 Room Air	0.000	16:53
06 Std. Gas	0.080	16:53
07 Room Air	0.000	16:54

Lot No = 02621080A1

Cyl No = 26

Exp Date = 03/05/2023

County = 08

Oper No. = 666666

Operator Signature

CHARLES EDER

0.080AC