

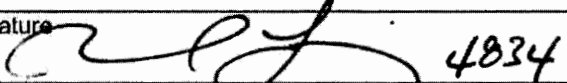


INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT
 NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
 CRIME LABORATORY DIVISION-TOXICOLOGY SECTION/BREATH ALCOHOL PROGRAM
 SFN 59281 (06/2018)

Serial Number 80-005358	Instrument Location BMDC
Reason for Install/Repair	
<input type="checkbox"/> Install After Receiving From Crime Laboratory <input type="checkbox"/> Install After Location Change <input checked="" type="checkbox"/> Other (Specify) <u>Power went out at jail during early mornings of 10/28/21; calibrations after power came on</u>	

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  4834	Date 10/28/2021
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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 	Certified Date 11.2.2021
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Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-005358
Location = BMDC 8164.14.00 09/16
10/28/2021 09:51

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

abcdefghijklmnopqrstuvwxy1234567890-|=|
ABCDEFGHIJKLMNopqrstuvwxyz!@#\$\$%^&*()_+?

abcdefghijklmnopqrstuvwxy1234567890-|=|
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 #? 02621080A1
Standard Cyl #? 9
Standard Expiration? 03/05/2023
Oper No? 130315

Flow Cal. Date: 06/04/2019
Slope 570
Intercept 4079

IR Calibration Date: 06/04/2019
 3um 9um

0th Coef(*100):	-19471	-24652
1st Coef(*100):	273237	143582
2nd Coef(*100):	2965	1293
H2O adj(mg/l*10k):	273	374

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


Operator Signature
JARED LEMIEUX

Remarks:

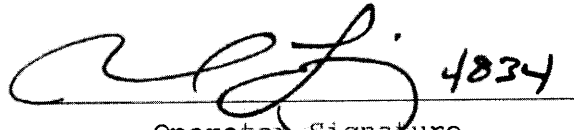
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-005358
Location = BMDC 8164.14.00 09/16
10/28/2021 09:46

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	09:46
02 Std. Gas	0.081	09:47
03 Room Air	0.000	09:47
04 Std. Gas	0.082	09:48
05 Room Air	0.000	09:48
06 Std. Gas	0.081	09:48
07 Room Air	0.000	09:49

Lot No = 02621080A1
Cyl No = 9
Exp Date = 03/05/2023
County = 08 Oper No. = 130315


Operator Signature
JARED LEMIEUX

Remarks:

Form 106-18000

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-005358
Location = BMDC 8164.14.00 09/16
10/28/2021 09:51

DRY CAL CHECK

Test	AC	Time
01 Room Air	RFI*	09:51
02 Room Air	RFI*	09:52

*Invalid Test
Inhibited - RFI

Lot No = 02621080A1
Cyl No = 9
Exp Date = 03/05/2023
County = 08 Oper No. = 130315

 4874

Operator Signature
JARED LEMIEUX

Remarks:

Form 106-I8000