	NORTH DAKOTA OFFICE OF ATTORNE CRIME LABORATORY DIVISIO	
Intox	ilyzer [®] 8000 Serial Number: 80-00 <u>3012</u>	Inspection Location: TOXL
Α.	 Pre-Inspection 1. Items with Instrument: Gas Cylinder Yes or No (If Yes, Lot #_ Keys Yes or No Power Cord Yes or No 2. ▲ Download Data 3. ▲ Upload Operator File 4. ▲ Current Location Code: OXL 5. ▲ Battery Check Was the external battery pack replaced 6. ▲ O-Rings Replaced Simulator O-Ring Replaced Breath Tube O-Ring 	
В.	 General Setup and Checks: 1. Diagnostics passed and instrument in "Ref. 2. Breath tube heated 3. Date, time and location code (Level 2,E). Time Zone: CST or MDT (Time on test 4. Print test (Level 1,P). Sign and attach test 5. Tank monitor (Level 3,D,G). Display: <u>940</u> psi Regulator: Display and Regulator ± 50 psi of each Gas tank tare necessary? If Yes, display readings after tare (Lev Display: psi Regulator: 	Re-set if necessary. st records will be in time zone circled) t record. <u>800</u> psi h other Yes or No Yes or No Yes or No
C.	Tests (Sign and attach test records): 1. Configure simulator for the following test Wet Calibration Check - Low AC (Leve Known Value ≤ 0.03 AC: Sim. Ser #: Lot #: Exp. Date: Results ± 0.005 of known AC	el 1,C) _AC
Tox	icology Unit - Breath Alcohol Section	Qualtrax ID: 11698 Revision: 1 Status: Published
Into	xilyzer 8000 Annual Inspection	Published: 03/24/2023
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2	2. Configure simulator for the follow Wet Calibration Check - High Known Value ≥ 0.25 AC: <u>0</u> . Sim. Ser #: <u>MP6039</u> Lot #: <u>202201F</u> Exp. Date: <u>18Jan2</u> A Results ± 5% AC of known	AC (Level 1,C) 300 AC
3	 Configure dry gas standard for the Known Value : 0.080A Gas Cylinder Lot #:A Cylinder #:S Exp. Date:10 [5] 23 	e remaining tests (Level 1,S). C مس <u>مومالهم</u>
4	 Interferent Check (Level 1,B) Known Value: 0.10 AC + 0.05 Sim. Ser #: DR 3841 Lot #: ICS 1 Exp. Date: N A Display reads "Interferent I 	% Acetone
	 KRFI Check (CMS Mode) Constraints (CMS M	
	Test 1 0.081 Test 4 0 Test 2 0.082 Test 5 0 Test 3 0.081 Test 6 0 Average	$ \begin{array}{c} \underline{0} \\ \underline$
D. F	Remarks/Maintenance: N/A	
	ent is acceptable to be used in the field.	es or No
a	change location code back to A.4.	Ole Apr2023
	lle Portschuler	Date 10 Apr 2023 Date
Toxicolo	gy Unit - Breath Alcohol Section	Qualtrax ID: 11698 Revision: 1
Intoxilvze	r 8000 Annual Inspection	Status: Published Published: 03/24/2023
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AEN

CMI, Inc. Intoxilyzer	Alcohol Analyzer
North Dakota Model 8000	SN 80-003072
Location = TOXL	8164.14.00 09/16
04/06/2023	10:16

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

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

Display Third Digit? Inhib Printer(Y/N)? Display Volume? Disable On Memfull? # of Print Copies? Select Std (D/W/I)? Standard Value? Standard Lot #? Standard Lot #? Standard Cyl #? Standard Expiration? Oper No? Flow Cal. Date: Slope	Enabled DABACABA Yes Yes No No Yes 1 Dry 0.080 34917080A3 26 02/05/2020 133237 03/09/2011 682
Slope Intercept	-620512
IR Calibration Date: 3um	03/09/2011 9um
Oth Coef(*100): -2476 1st Coef(*100): 26455 2nd Coef(*100): 1876	

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

331

H2O adj(mg/l*10k): 497

Operator Signature ANNA NAREHOOD

Remarks:

Print Test

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-003072Location = TOXL8164.14.00 09/1604/06/202310:18

	WET CAL CHECK	
Test	AC	Time
01 Room Air	0.000	10:19
02 Std. Sol.	0.019	10:20
03 Room Air	0.000	10:20
04 Std. Sol.	0.019	10:21
05 Room Air	0.000	10:21
06 Std. Sol.	0.019	10:22
07 Room Air	0.000	10:22

08 Sim Temp = 34.0°C

Simul Ser No = MP5318		
Std Sol No = 202201A		
County = 08	Oper No. = 133237	

Operator Signature ANNA NAREHOOD

Remarks:

LOW AC Check-0.020AC

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-003072Location = TOXL8164.14.00 09/1604/06/202310:26

		WET CAL CHECK	
Т	est	AC	Time
01	Room Air	0.000	10:26
02	Std. Sol.	0.297	10:27
03	Room Air	0.000	10:28
04	Std. Sol.	0.299	10:29
05	Room Air	0.000	10:29
06	Std. Sol.	0.300	10:30
07	Room Air	0.000	10:30
08	Sim Temp =	: 34.0°C	

Operator Signature ANNA NAREHOOD

Remarks:

Check- 0.300 Ac High He

CMI, Inc. Intoxilyz North Dakota Model Location = TOXL 04/06/2023		-003072
Test	AC	Time
01 Room Air 02 *Subject Test	0.000 INT*	11:11 11:11

11:12

02 *Subject Test INT* 03 Room Air 0.000 *Invalid Test

Interferent Detected

Sub Name = TEST, DONOR2 NONE Sub DOB = 07/25/1998 Sub Sex = Male Weight = NA Test = OTH Cit = INTERFERENT CK Dr. Lic. = ND/TES989643 Lot No = 26021080A1 Cyl No = 25 Expiration Date = 10/05/2023 County = 08 Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks:

Interferent Check

NDOAG Crime Lab. Div., Bismarck, ND 58501 Alcohol Analyzer CMI, Inc. Intoxilyzer SN 80-003072 North Dakota Model 8000 8164.14.00 09/16 Location = TOXL 04/06/2023 11:13 Time AC Test 11:14 OK 01 Diagnostic 11:14 0.000 02 Room Air 11:14 03 *Subject Test RFI* 04 Room Air 0.000 11:15 *Invalid Test Inhibited - RFI Sub Name = TEST, DONOR2 NONE Sub DOB = 07/25/1998Weight = NASub Sex = Male Cit = RFI CHECK Test = OTHDr. Lic. = ND/TES989643 Lot No = 26021080A1Cyl No = 25Expiration Date = 10/05/2023County = 08Oper No. = 133237

Intoxilyzer Test Record and Checklist

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

Operator Signature ANNA NAREHOOD

Remarks:

RFI Check

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-003072Location = TOXL8164.14.00 09/1604/06/202311:15

			DRY CAL CHECK	
Tes	st		AC	Time
01 F	Room	Air	0.000	11:16
02 5	Std.	Gas	0.081	11:16
03 F	Room	Air	0.000	11:17
04 5	Std.	Gas	0.082	11:17
05 F	Room	Air	0.000	11:17
06 5	Std.	Gas	0.081	11:18
07 F	Room	Air	0.000	11:18

Operator Signature ANNA NAREHOOD

Remarks:

Dry Cal Check-#1-3

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-003072Location = TOXL8164.14.00 09/1604/06/202311:19

Test	AC	
		Time
01 Room Air	0.000	11:20
02 Std. Gas	0.082	11:20
03 Room Air	0.000	11:20
04 Std. Gas	0.082	11:21
05 Room Air	0.000	11:21
06 Std. Gas	0.082	11:22
07 Room Air	0.000	11:22

Operator Signature ANNA NAREHOOD

Remarks:

Dry cal check#4-6

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-003072Location = TOXL8164.14.00 09/1604/06/202311:23

DRY CAL CHECK	
DRI CAL CHECK	
AC	Time
0.000	11:23
0.082	11:23
0.000	11:24
0.082	11:24
0.000	11:25
0.082	11:25
0.000	11:26
	0.000 0.082 0.000 0.082 0.000 0.082

Operator Signature ANNA NAREHOOD

Remarks:

Dry Car Check #7-9