



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 80-003074	Instrument Location Bowman County Sheriff's OFC.
Reason for Install/Repair	
<input checked="" type="checkbox"/> Install After Receiving From Crime Laboratory <input type="checkbox"/> Install After Location Change <input checked="" type="checkbox"/> Other (Specify) <u>Annual Inspection at Crime Laboratory</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): N/A
- 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 Frank Eberle	Date 4-21-2023
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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 Ann Hill	Certified Date 25Apr2023
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* Spoke to Frank Eberle on 24Apr2023. Changed location code to BOWM.

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-003071
Location = ~~BOWM~~ *BOWM den 25Apr23* 8164.14.00 09/16
04/21/2023 09:53

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

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

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

Current Instrument Setup

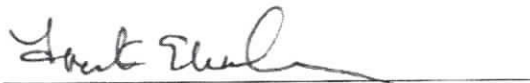
Data Entry Mode: Enabled
Start Test Sequence: DABACABA
Display Prelim Rslt? Yes
Display Third Digit? Yes
Inhib Printer(Y/N)? No
Display Volume? No
Disable On Memfull? Yes
of Print Copies? 1
Select Std (D/W/I)? Dry
Standard Value? 0.080
Standard Lot #? 26021080A1
Standard Cyl #? 014
Standard Expiration? 10/05/2023
Oper No? 130015

Flow Cal. Date: 07/09/2010
Slope 806
Intercept -994737

IR Calibration Date: 04/10/2015
3um 9um

0th Coef(*100):	-11328	-10938
1st Coef(*100):	268087	134278
2nd Coef(*100):	3093	1368
H2O adj (mg/l*10k):	242	233

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



Operator Signature
FRANK EBERLE

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 80-003071
Location = ~~BOWN~~ **BOWM** 8164.14.00 09/16
04/21/2023 **aem 25Apr23** 09:53

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	09:54
02 Std. Gas	0.079	09:54
03 Room Air	0.000	09:55
04 Std. Gas	0.078	09:55
05 Room Air	0.000	09:56
06 Std. Gas	0.079	09:56
07 Room Air	0.000	09:57

Lot No = 26021080A1
Cyl No = 014
Exp Date = 10/05/2023
County = 06 Oper No. = 130015


Operator Signature
FRANK EBERLE

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 80-003071
Location = ~~BOWN~~ *BOWN* 8164.14.00 09/16
04/21/2023 *aen* *25Apr23* 09:58

Test	AC	Time
01 Room Air	RFI*	10:00
02 Room Air	0.000	10:00

*Invalid Test
Inhibited - RFI

Sub Name = TEST, SAMPLE A
Sub DOB = 03/18/1974
Sub Sex = Male Weight = 220
Test = OTH Cit = ABC123
Dr. Lic. = ND/TES741234
Lot No = 26021080A1
Cyl No = 014
Expiration Date = 10/05/2023
County = 06 Oper No. = 130015



Operator Signature
FRANK EBERLE

Remarks:

Form 106-I8000