|      | NORTH DAKOTA OFFICE OF ATTORNE<br>CRIME LABORATORY DIVISIO   |   |
|------|--|---|
|      |  |   |
| Into | xilyzer <sup>®</sup> 8000 Serial Number: 80-00 5958  | Inspection Location: TOXL   |
| Α.   | <ul> <li>Pre-Inspection</li> <li>1. Items with Instrument:<br/>Gas Cylinder Yes or No (If Yes, Lot #_<br/>Keys Yes or No<br/>Power Cord Yes or No</li> <li>2. I Download Data</li> <li>3. Upload Operator File</li> <li>4. Current Location Code: <u>OLIV</u></li> <li>5. I Battery Check<br/>Was the external battery pack replaced</li> <li>6. O-Rings<br/>Replaced Simulator O-Ring<br/>Replaced Breath Tube O-Ring</li> </ul>  |   |
| В.   | <ul> <li>General Setup and Checks:</li> <li>1. ☑ Diagnostics passed and instrument in "Rea</li> <li>2. ☑ Breath tube heated</li> <li>3. ☑ Date, time and location code (Level 2,E).<br/>Time Zone: CST or MDT (Time on tes</li> <li>4. ☑ Print test (Level 1,P). Sign and attach test</li> <li>5. ☑ Tank monitor (Level 3,D,G).<br/>Display: <u>904</u> psi Regulator:<br/>Display and Regulator ± 50 psi of each<br/>Gas tank tare necessary?<br/>If Yes, display readings after tare (Lev<br/>Display: psi Regulator:</li> </ul> | Re-set if necessary.<br>at records will be in time zone circled).<br>t record.<br><u>IDOO</u> psi<br>n other Yes or No<br>Yes or No<br>Yes or No<br>Yes or No |
| C.   | Tests (Sign and attach test records):<br>1. ☑ Configure simulator for the following test (<br>Wet Calibration Check - Low AC (Leve<br>Known Value ≤ 0.03 AC: 0.020<br>Sim. Ser #: <u>MP5318</u><br>Lot #: <u>2022010</u><br>Exp. Date: <u>INAN 24</u><br>⊠ Results ± 0.005 of known AC   | AC  |
| То   | exicology Unit - Breath Alcohol Section  | Qualtrax ID: 11698 Revision: 1<br>Status: Published   |
| Int  | toxilyzer 8000 Annual Inspection   | Published: 03/24/2023   |
| u    | NCONTROLLED WHEN PRINTED   | Page 1 of 2   |

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| <ol> <li>Configure simulator for the followin<br/>Wet Calibration Check - High A<br/>Known Value ≥ 0.25 AC:30<br/>Sim. Ser #:</li></ol> | C (Level 1,C)<br>AC                                |
|---|--|
| 3. Stresults ± 07, 700 of known 7<br>Known Value :AC<br>Gas Cylinder Lot #:4<br>Cylinder #:6<br>Exp. Date:0[5] λ3                       | remaining tests (Level 1,S).                       |
| <ul> <li>4.</li></ul>   | Acetone  |
| 5. 🕅 RFI Check (CMS Mode)<br>🖾 Display reads "RFI Detect"   |  |
| 6. Dry Calibration Check (Level 1,C)<br>Test 1 0.080 Test 4 0.0<br>Test 2 0.080 Test 5 0.0<br>Test 3 0.079 Test 6 0                     | $\frac{519}{000}$ Test 9 0.019                     |
| Average<br>Average<br>Results ± 0.005 AC of known<br>D. Remarks/Maintenance: <u>Replaced breath</u>                                     | H AEN OSMAY  |
| D. Remarks/Maintenance: <u>Replaced breath</u>  | hose after C.J. There was                          |
| air escaping at the end of breath hose.   | Ranaknown Acsoln                                   |
| through breath hose.  |  |
| Instrument is acceptable to be used in the field. Ye  | s or No  |
| If No, state reason(s) why:   |  |
| If Yes, change location code back to A.4.   | <u>28Apr2023</u><br>Date                           |
| Reviewer  | OBMay 2023<br>Date                                 |
| Toxicology Unit - Breath Alcohol Section  | Qualtrax ID: 11698 Revision: 1                     |
| Intoxilyzer 8000 Annual Inspection  | Status: Published                                  |
|   | Published: 03/24/2023<br>Page <b>2</b> of <b>2</b> |
|   |  |

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AEN

| CMI, Inc. Intoxilyzer   | Alcohol Analyzer |
|-------------------------|------------------|
| North Dakota Model 8000 | SN 80-005958     |
| Location = TOXL         | 8164.14.00 09/16 |
| 04/28/2023              | 13:24            |

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

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

| Display Third Digit?<br>Inhib Printer(Y/N)?<br>Display Volume?<br>Disable On Memfull?<br># of Print Copies?<br>Select Std (D/W/I)?<br>Standard Value?<br>Standard Lot #?<br>Standard Cyl #? | Enabled<br>DABACABA<br>Yes<br>Yes<br>No<br>No<br>Yes<br>1<br>Dry<br>0.080<br>34921080A1<br>58<br>02/05/2024<br>133237 |
|---|---|
| Flow Cal. Date:   | 06/21/2013  |
| Slope   | 716   |
| Intercept   | -760436   |
| IR Calibration Date:  | 04/07/2015  |
| 3um   | 9um   |
| 0th Coef(*100): -17179  | 9 -17694  |

0th Coef(\*100):-17179-176941st Coef(\*100):2593281308902nd Coef(\*100):34731654H2O adj(mg/l\*10k):425422

Operator Signature ANNA NAREHOOD

Remarks:

Print Test

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-005958Location = TOXL8164.14.00 09/1604/28/202313:35

|               | WET CAL CHECK |       |
|---------------|---------------|-------|
| Test          | AC            | Time  |
| 01 Room Air   | 0.000         | 13:36 |
| 02 Std. Sol.  | 0.018         | 13:37 |
| 03 Room Air   | 0.000         | 13:37 |
| 04 Std. Sol.  | 0.019         | 13:38 |
| 05 Room Air   | 0.000         | 13:39 |
| 06 Std. Sol.  | 0.019         | 13:39 |
| 07 Room Air   | 0.000         | 13:40 |
| 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 80-005958Location = TOXL8164.14.00 09/1604/28/202313:41

|    | Г         |              |          |
|----|-----------|--------------|----------|
|    |           | WET CAL CHEC | 2K       |
| Te | est       | AC           | Time     |
| 01 | Room Air  | 0.00         | 00 13:41 |
|    | Std. Sol. | 0.29         | 13:42    |
|    | Room Air  | 0.00         | 13:43    |
|    | Std. Sol. | 0.29         | 97 13:43 |
|    | Room Air  | 0.00         | 13:44    |
|    | Std. Sol. | 0.29         | 98 13:45 |
|    | Room Air  | 0.00         | 13:45    |
| 08 | Sim Temp  | = 34.0°C     |          |

Simul Ser No = MP3067 Std Sol No = 202201F County = 08 Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks:

High AC Check- 0.300AC

| CMI, Inc. Intoxily<br>North Dakota Model<br>Location = TOXL<br>04/28/2023 |       | -005958 |
|---|-------|---------|
| Test  | AC    | Time    |
| 01 Room Air   | 0.000 | 14:07   |
| 02 Subject Test 1   | 0.041 | 14:07   |
| 03 Room Air   | 0.000 | 14:08   |
| 04 Reported AC  | 0.041 | 14:07   |

No RFI Detected

Sub Name = TEST, DONOR2 NONE Sub DOB = 07/25/1998Sub Sex = Male Weight = NA Test = OTH Cit = BREATH HOSE CK Dr. Lic. = ND/TES989643 Lot No = 26021080A1 Cyl No = 16 Expiration Date = 10/05/2023County = 08 Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks:

Breath hose replacement check

0.040AC Lot: 21GP41169 Form 106-18000

DR 5131

NDOAG Crime Lab. Div., Bismarck, ND 58501 CMI, Inc. Intoxilyzer Alcohol Analyzer SN 80-005958 North Dakota Model 8000 8164.14.00 09/16 Location = TOXL 14:08 04/28/2023 AC Time Test 14:09 0.000 01 Room Air 14:09 02 \*Subject Test INT\* 14:10 0.000 03 Room Air \*Invalid Test Interferent Detected Sub Name = TEST, DONOR2 NONE Sub DOB = 07/25/1998Weight = NA Sub Sex = Male Cit = INTERFERENT CK Test = OTHDr. Lic. = ND/TES989643 Lot No = 26021080A1 Cyl No = 16Expiration Date = 10/05/2023Oper No. = 133237 County = 08

Intoxilyzer Test Record and Checklist

Operator Signature ANNA NAREHOOD

Remarks:

Interferent Chuk

Intoxilyzer Test Record and Checklist NDOAG Crime Lab. Div., Bismarck, ND 58501 Alcohol Analyzer CMI, Inc. Intoxilyzer SN 80-005958 North Dakota Model 8000 8164.14.00 09/16 Location = TOXL 14:10 04/28/2023 Time AC Test 14:11 OK 01 Diagnostic 14:11 0.000 02 Room Air RFI\* 14:12 03 \*Subject Test 0.000 14:12 04 Room Air \*Invalid Test Inhibited - RFI Sub Name = TEST, DONOR2 NONE Sub DOB = 07/25/1998Sub Sex = Male Weight = NA Cit = RFI CHECK Test = OTHDr. Lic. = ND/TES989643 Lot No = 26021080A1Cyl No = 16Expiration Date = 10/05/2023Oper No. = 133237 County = 08

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

Operator Signature ANNA NAREHOOD

Remarks:

RFI Cherk

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-005958Location = TOXL8164.14.00 09/1604/28/202314:13

|    |      |     | DRY CAL CHECK |       |
|----|------|-----|---------------|-------|
| Te | est  |     | AC            | Time  |
| 01 | Room | Air | 0.000         | 14:13 |
| 02 | Std. | Gas | 0.080         | 14:14 |
|    | Room |     | 0.000         | 14:14 |
| 04 | std. | Gas | 0.080         | 14:14 |
| 05 | Room | Air | 0.000         | 14:15 |
| 06 | Std. | Gas | 0.079         | 14:15 |
| 07 | Room | Air | 0.000         | 14:16 |

Operator Signature ANNA NAREHOOD

Remarks:

Cherk #1-3

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-005958Location = TOXL8164.14.00 09/1604/28/202314:16

|    |      | ľ   | DRY CAL CHECK |       |
|----|------|-----|---------------|-------|
| Τe | est  |     | AC            | Time  |
| 01 | Room | Air | 0.000         | 14:17 |
| 02 | Std. | Gas | 0.080         | 14:17 |
| 03 | Room | Air | 0.000         | 14:17 |
| 04 | Std. | Gas | 0.079         | 14:18 |
| 05 | Room | Air | 0.000         | 14:18 |
| 06 | Std. | Gas | 0.080         | 14:19 |
|    | Room |     | 0.000         | 14:19 |
|    |      |     |               |       |

Operator Signature ANNA NAREHOOD

Remarks:

DN

Cherk #4-6 ca

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-005958Location = TOXL8164.14.00 09/1604/28/202314:19

|         | I   | DRY CAL CHECK |       |
|---------|-----|---------------|-------|
| Test    |     | AC            | Time  |
| 01 Room | Air | 0.000         | 14:20 |
| 02 Std. | Gas | 0.080         | 14:20 |
| 03 Room | Air | 0.000         | 14:21 |
| 04 Std. | Gas | 0.080         | 14:21 |
| 05 Room | Air | 0.000         | 14:22 |
| 06 Std. | Gas | 0.079         | 14:22 |
| 07 Room | Air | 0.000         | 14:23 |

Operator Signature ANNA NAREHOOD

Remarks:

Carcherk #7-9 Dry