



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 80-005944	Instrument Location Cass County Jail - Machine #1
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>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): None
- 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.

*AEN
26 May 2023*

Field Inspector Signature <i>[Signature]</i> 31671	Date 5/26/23
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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 <i>[Signature]</i>	Certified Date 26 May 2023
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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 80-005944
Location = CASS 8164.14.00 09/16
05/26/2023 08:07

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

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

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

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 #? 34921080A1
Standard Cyl #? 50
Standard Expiration? 02/05/2024
Oper No? 090801


Flow Cal. Date: 06/20/2013
Slope 677
Intercept -702620

IR Calibration Date: 06/09/2017

	3um	9um
0th Coef(*100):	-16158	-17815
1st Coef(*100):	266780	136962
2nd Coef(*100):	1117	1089
H2O adj(mg/l*10k):	317	364

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

Good!



Operator Signature
KATHRYN ALLEN

Remarks:

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-005944
Location = CASS 8164.14.00 09/16
05/26/2023 08:22

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	08:22
02 Std. Gas	0.082	08:23
03 Room Air	0.000	08:23
04 Std. Gas	0.081	08:24
05 Room Air	0.000	08:24
06 Std. Gas	0.082	08:25
07 Room Air	0.000	08:25

Lot No = 34921080A1
Cyl No = 50
Exp Date = 02/05/2024
County = 09 Oper No. = 090801


Operator Signature
KATHRYN ALLEN

Remarks:

Acceptable Range!
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 80-005944
Location = CASS 8164.14.00 09/16
05/26/2023 08:26

Test	AC	Time
01 Room Air	0.000	08:28
02 *Subject Test	RFI*	08:28
03 Room Air	0.000	08:28

*Invalid Test
Inhibited - RFI

Sub Name = TEST INSTAL, TEST INSTAL NA
Sub DOB = 01/01/1900
Sub Sex = Female Weight = 200
Test = DUI Cit = 02000000000000
Dr. Lic. = ND/TEST SUBJECT
Lot No = 34921080A1
Cyl No = 50
Expiration Date = 02/05/2024
County = 09 Oper No. = 090801



Operator Signature
KATHRYN ALLEN

Remarks:

RFI check Good!
Form 106-I8000