



**ETHANOL GAS STANDARD CYLINDER REPORT**  
 NORTH DAKOTA OFFICE OF ATTORNEY GENERAL  
 CRIME LABORATORY DIVISION-TOXICOLOGY SECTION/BREATH ALCOHOL PROGRAM  
 SFN 59282 (08/2018)

Chemical Test Operator Name (Print) <b>Brost, Easton A.</b>		
Location <b>DCSO = Dahn County</b>	Intoxilyzer® Serial Number <b>80-004191</b>	
Gas Lot Number <b>34921080A1</b>	Gas Cylinder Number <b>053</b>	Gas Expiration Date <b>2/5/24</b>

Check When Done:

- 1. Scan/Enter Gas Cylinder Information (Level 1, Function S).
- 2. Perform an ACA Test (Level 1, Function C).  
 Write in the ACA Test Results (Reported to 3 Digits, Ex. 0.081).  
 A. 0.078 AC  
 B. 0.077 AC  
 C. 0.078 AC
- 3. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the Intoxilyzer® for Use.
- 4. File Previous Intoxilyzer® Record (SFN50496, Form 120-G) at the Intoxilyzer® Location at the Agency.
- 5. Send the Following to the Crime Laboratory:  
 A. Ethanol Gas Standard Cylinder Report (SFN59282, Form 105-G).  
 B. ACA Test Record.

Chemical Test Operator Signature <b>E. A. Brost</b>	Date <b>6/7/23</b>
Reviewed By (Crime Laboratory Use Only) <b>[Signature]</b>	Date <b>07 June 23</b>


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

CMI, Inc. Intoxilyzer      Alcohol Analyzer  
North Dakota Model 8000      SN 80-004191  
Location = DUNN      8164.14.00 09/16  
06/07/2023      02:58

DRY CAL CHECK

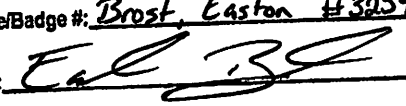
Test	AC	Time
01 Room Air	0.000	02:58
02 Std. Gas	0.078	02:59
03 Room Air	0.000	02:59
04 Std. Gas	0.077	03:00
05 Room Air	0.000	03:00
06 Std. Gas	0.078	03:01
07 Room Air	0.000	03:01

Lot No = 34921080A1  
Cyl No = 53  
Exp Date = 02/05/2024  
County = 13      Oper No. = 132823

  
Operator Signature  
EASTON BROST

Remarks:

Form 106-I8000

I certify that the attached is a true and correct copy of the intoxilyzer test record.  
Print Name/Badge #: Brost, Easton #3254  
Signature:   
Date: 06/07/23      DUNN COUNTY SHERIFF'S OFFICE