



**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>DELBERT MOFFMANN</b>		
Location <b>SHER</b>	Intoxilyzer® Serial Number <b>80-005950</b>	
Gas Lot Number <b>34921080A1</b>	Gas Cylinder Number <b>046</b>	Gas Expiration Date <b>02-05-2024</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. **0.080** AC  
 B. **0.081** AC  
 C. **0.081** 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 <i>Delbert Moffmann</i>	Date <b>09-21-2023</b>
Reviewed By (Crime Laboratory Use Only) <i>Aime Nahl</i>	Date <b>22Sep2023</b>

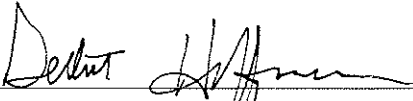
Intoxilyzer Test Record and Checklist  
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer            Alcohol Analyzer  
North Dakota Model 8000        SN 80-005950  
Location = SHER                    8164.14.00 09/16  
09/21/2023                            15:20

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	15:21
02 Std. Gas	0.080	15:21
03 Room Air	0.000	15:22
04 Std. Gas	0.081	15:22
05 Room Air	0.000	15:22
06 Std. Gas	0.081	15:23
07 Room Air	0.000	15:23

Lot No = 34921080A1  
Cyl No = 46  
Exp Date = 02/05/2024  
County = 42                            Oper No. = 048909

  
\_\_\_\_\_  
Operator Signature  
DELBERT HOFFMANN

Remarks:

ACA TEST

Form 106-I8000