



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 80-004944	Instrument Location Williston, ND
Reason for Install/Repair	
<input type="checkbox"/> Install After Receiving From Crime Laboratory <input checked="" type="checkbox"/> Install After Location Change <input type="checkbox"/> Other (Specify) _____	

Check When Done:

- 1. Surge Protector Installed/Property Grounded.
- 2. Telephone Line Connected to Intoxilyzer® 8000. **N/A**
- 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 (Level1, 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 Alyson Moxey	Date 02/07/2024
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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 Ame Nahl	Certified Date 08Feb2024
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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 80-004944
Location = WILL 8164.14.00 09/16
02/07/2024 17:45

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

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

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

Current Instrument Setup

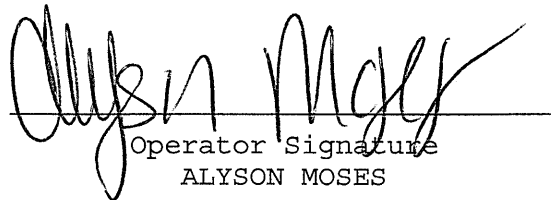
Data Entry Mode: Enabled
Start Test Sequence: DABACABA
Display Prelim Rslt? Yes
Display Third Digit? Yes
Inhib Printer(Y/N)? No
Display Volume? No
Disable On Memfull? Yes
of Print Copies? 1
Select Std (D/W/I)? Dry
Standard Value? 0.080
Standard Lot #? 14323080A4
Standard Cyl #? 43
Standard Expiration? 06/05/2025
Oper No? 132166

Flow Cal. Date: 07/01/2011
Slope 685
Intercept -634740

IR Calibration Date: 07/01/2011
 3um 9um

0th Coef(*100): -22591 -17234
1st Coef(*100): 265915 132691
2nd Coef(*100): 2841 1562
H2O adj(mg/l*10k): 559 425

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


Operator Signature
ALYSON MOSES

Remarks:

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004944
Location = WILL 8164.14.00 09/16
02/07/2024 17:46

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	17:46
02 Std. Gas	0.081	17:47
03 Room Air	0.000	17:47
04 Std. Gas	0.081	17:47
05 Room Air	0.000	17:48
06 Std. Gas	0.081	17:48
07 Room Air	0.000	17:49

Lot No = 14323080A4
Cyl No = 43
Exp Date = 06/05/2025
County = 53 Oper No. = 132166


Operator Signature
ALYSON MOSES

Remarks:

Form 106-I8000

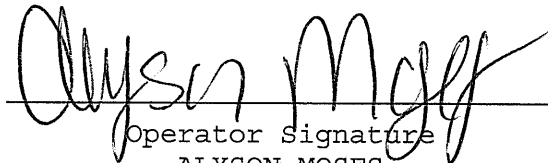
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004944
Location = WILL 8164.14.00 09/16
02/07/2024 17:50

Test	AC	Time
01 Room Air	RFI*	17:52
02 Room Air	0.000	17:52

*Invalid Test
Inhibited - RFI

Sub Name = RFI TEST, INSTALL NA
Sub DOB = 02/07/2004
Sub Sex = Male Weight = NA
Test = DUI Cit = NA
Dr. Lic. = ND/NA
Lot No = 14323080A4
Cyl No = 43
Expiration Date = 06/05/2025
County = 53 Oper No. = 132166


Operator Signature
ALYSON MOSES

Remarks:

Form 106-I8000