	NORTH DAKOTA OFFICE OF ATTORNEY GENERAL CRIME LABORATORY DIVISION	
	INTOXILYZER [®] 8000 ANNUAL INSPECTION	
Into	kilyzer [®] 8000 Serial Number: 80-00 6666 Serial Number: 80-00 6666 Serial Number: 80-00 6666 Serial Number: 10 K L	
Α.	Pre-Inspection 1. Items with Instrument: Gas Cylinder Yes or No (If Yes, Lot # Cyl. #) Keys Yes or No Power Cord Yes or No 2. Download Data 3. Upload Operator File 4. Current Location Code:	
	Was the external battery pack replaced? Yes or No 6.	
Β.	 General Setup and Checks: 1. Diagnostics passed and instrument in "Ready" mode 2. Breath tube heated 3. Date, time and location code (Level 2,E). Re-set if necessary. Time Zone: CST or MDT (Time on test records will be in time zone circled 4. Print test (Level 1,P). Sign and attach test record. 5. Interpret Test (Level 3,D,G). Display: <u>973</u> psi Regulator: <u>950</u> psi Display and Regulator ± 50 psi of each other Yes or No Gas tank tare necessary? Yes or No If Yes, display readings after tare (Level 3,M,C,G): Display: psi Regulator: psi).
C.	Tests (Sign and attach test records):1. \square Configure simulator for the following test (Level 1,S).Wet Calibration Check - Low AC (Level 1,C)Known Value ≤ 0.03 AC: $_0.020$ Known Value ≤ 0.03 AC: $_0.020$ ACSim. Ser #: $_202301E$ MP3002Lot #: $_202301E$ Exp. Date: $_170403S$ Results ± 0.005 of known ACDocument ID: 11698 Revision: 2Laboratory Unit - Breath Alcohol Section	
	Laboratory Unit: Toxicology Unit - Breath Alcohol Section Status: Published Approved By: Laboratory Director Date Approved: 02/29/2024	

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	2.	 ✓ Configure simulator for the following test (Level Wet Calibration Check - High AC (Level Known Value ≥ 0.25 AC: 0.400 / A Sim. Ser #: 202212C MPC Lot #: 202212C Exp. Date: 08Dec24 	1,C) AC 0036
	3.	 ☑ Results ± 5% AC of known AC ☑ Configure dry gas standard for the remainin Known Value : <u>0.0℃0</u> AC Gas Cylinder Lot #: <u>14323080A4</u> Cylinder #: <u>13</u> 	
	4.	Exp. Date: <u>0 5 25</u> Interferent Check (Level 1,B) Known Value: <u>0.10</u> AC + 0.05% Acetone Sim. Ser #: <u>DR7344</u> Lot #: <u>ICS 8</u> Exp. Date: <u>NIA</u>	
	5.	⊠ Display reads "Interferent Detect" ⊠ RFI Check (CMS Mode)	
	6.	 ☑ Display reads "RFI Detect" ☑ Dry Calibration Check (Level 1,C) Test 1 <u>0.079</u> Test 4 <u>0.079</u> Test 2 <u>0.079</u> Test 5 <u>0.078</u> Test 3 <u>0.079</u> Test 5 <u>0.078</u> Test 6 <u>0.090</u> Average <u>0.099</u> ☑ Results ± 0.005 AC of known AC 	Test 8 0.019 Test 9 0.080
D.	Rema	urks/Maintenance: <u>NIA</u>	
		s acceptable to be used in the field. Yes or No eason(s) why:	
Inspec	ctor Sig	ge location code back to A.4. 🖄	OIApr2D24 Date D2 Apr. 2024 Date
lr	ntoxilyzer	8000 Annual Inspection	Document ID: 11698 Revisio

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Laboratory Unit: Toxicology Unit - Breath Alcohol Section

Approved By: Laboratory Director

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CMI, Inc. Intoxilyzer	Alcohol Analyzer
North Dakota Model 8000	SN 80-006666
Location = TOXL	8164.14.00 09/16
04/01/2024	10:43

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

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

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 #?	13
Standard Expiration?	06/05/2025
Oper No?	133237
Flow Cal. Date:	05/16/2023
Slope	686
Intercept	-761238
	10/10/0000

IR Calibration Date: 12/12/2023 3um 9um Oth Coef(*100): -19799 -31409 1st Coef(*100): 262872 135157 2nd Coef(*100): 3408 1553 H2O adj(mg/l*10k): 232 377

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

Operator Signature ANNA NAREHOOD

Remarks: Print Test

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-006666Location = TOXL8164.14.00 09/1604/01/202410:52

	WET CAL	CHECK	
Test		AC	Time
01 Room Air 02 Std. Sol 03 Room Air		0.000 0.019 0.000	10:52 10:53 10:54 10:55
04 Std. Sol 05 Room Air 06 Std. Sol 07 Room Air		0.019 0.000 0.019 0.000	10:55 10:55 10:56 10:56
08 Sim Temp	= 34.0°C		
Simul Ser No	D = MP3002		

Simul Ser No = MP3002 Std Sol No = 202301E County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks:

LOW AC Check- 0.020AC

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-006666Location = TOXL8164.14.00 09/1604/01/202410:58

		WET CAL C	HECK	
Т	est		AC	Time
01	Room Air	0	.000	10:58
02	Std. Sol.	0	.402	10:59
03	Room Air	0	.000	11:00
04	Std. Sol.	0	.404	11:00
05	Room Air	0	.000	11:01
06	Std. Sol.	0	.405	11:01
07	Room Air	0	.000	11:02
08	Sim Temp =	34.0°C		

Operator Signature ANNA NAREHOOD

Remarks:

High AC Check- 0.400AC

Intoxilyzer Test Record and Checklist NDOAG Crime Lab. Div., Bismarck, ND 58501 Alcohol Analyzer CMI, Inc. Intoxilyzer SN 80-006666 North Dakota Model 8000 8164.14.00 09/16 Location = TOXL 11:03 04/01/2024 Time AC Test 11:05 0.000 01 Room Air 11:05 02 *Subject Test INT* 11:06 03 Room Air 0.000 *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 = 14323080A4Cyl No = 13Expiration Date = 06/05/2025Oper No. = 133237 County = 08

Operator Signature ANNA NAREHOOD

Remarks: Interferent Check

NDOAG Crime Lab. Div., Bismarck, ND 58501 Alcohol Analyzer CMI, Inc. Intoxilyzer SN 80-006666 North Dakota Model 8000 8164.14.00 09/16 Location = TOXL 04/01/2024 11:06 AC Time Test 11:07 01 Diagnostic OK 0.000 11:08 02 Room Air 11:08 03 *Subject Test RFI* 04 Room Air 0.000 11:08 *Invalid Test Inhibited - RFI Sub Name = TEST, DONOR2 NONE Sub DOB = 07/25/1998Sub Sex = Male Weight = NA Test = OTHCit = RFI CHECK Dr. Lic. = ND/TES989643 Lot No = 14323080A4Cyl No = 13Expiration Date = 06/05/2025Oper No. = 133237 County = 08

Intoxilyzer Test Record and Checklist

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

Operator Signature ANNA NAREHOOD

Remarks: 2

RFI Check

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-006666Location = TOXL8164.14.00 09/1604/01/202411:09

			DRY CAL CHECK	
Te	est		AC	Time
01	Room	Air	0.000	11:10
02	Std.	Gas	0.079	11:10
03	Room	Air	0.000	11:11
04	Std.	Gas	0.079	11:11
05	Room	Air	0.000	11:11
06	Std.	Gas	0.079	11:12
07	Room	Air	0.000	11:12

Lot No = 14323080A4 Cyl No = 13 Exp Date = 06/05/2025 County = 08 Oper No. = 133237

Operator Signature ANNA NAREHOOD

Dry cal check

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Remarks:

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-006666Location = TOXL8164.14.00 09/1604/01/202411:12

			DRY CAL CHECK	
Τe	est		AC	Time
01	Room	Air	0.000	11:13
02	Std.	Gas	0.079	11:13
03	Room	Air	0.000	11:14
04	Std.	Gas	0.078	11:14
05	Room	Air	0.000	11:15
06	Std.	Gas	0.080	11:15
07	Room	Air	0.000	11:16

Lot No = 14323080A4 Cyl No = 13 Exp Date = 06/05/2025 County = 08 Oper No. = 133237

Operator Signature ANNA NAREHOOD

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Remarks:

Form 106-18000

#4-6

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-006666Location = TOXL8164.14.00 09/1604/01/202411:16

		[DRY CAL CHECK	
Te	est		AC	Time
01	Room	Air	0.000	11:17
02	Std.	Gas	0.080	11:17
03	Room	Air	0.000	11:17
04	Std.	Gas	0.079	11:18
05	Room	Air	0.000	11:18
06	Std.	Gas	0.080	11:19
07	Room	Air	0.000	11:19

Lot No = 14323080A4 Cyl No = 13 Exp Date = 06/05/2025 County = 08 Oper No. = 133237

Operator Signature ANNA NAREHOOD

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Remarks:

cherk- #7-9