NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 INITIAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 _4198_

A. General Setup and Checks:
   1. Initial start up
      - ☒ Power On
      - ☒ 5-minute countdown during initial warm-up
      - ☒ 1-minute countdown to begin test after standby mode
   2. ☒ Display Intensity (Ctrl + ↑ or ↓)
   3. Password Security:
      - ☒ Level 1 (Operator)
      - ☒ Level 2 (Field Inspector)
      - ☒ Level 3 (Lab Personnel)
   4. ☒ Printer Setup (Level 3,S,P)
   5. ☒ Forms Load Completed (CMI, Inc., CoBrA Software)

B. Level 1 Setup and Checks:
   1. ☒ Internal Printer Test (Level 1,P). Sign and attach record.
      - ☒ Paper Feed
   2. ☒ External Printer Test (Level 1,P). Sign and attach record.
   3. Barcode Reader (Level 1,B) (Tone sounds after each)
      - ☒ Operator ID
      - ☒ Invalid ID
      - ☒ ND License
      - ☒ R key: Refusal. Sign and attach record.

C. Level 2 Setup and Checks:
   1. ☒ Continuous Air Blank (Level 2,A)
   2. ☒ Diagnostic (Level 2,D). Sign and attach test record.
   3. ☒ Prelim Data Entry (Level 2,E)
   4. Ser Number/Version Info (Level 2,V):
      Inst Ser#: _80-004198_   DSP Ver: _1362.14_
      Core Ver: _8164.14_   CPLD Ver: _7_

D. Level 3 Setup and Checks:
1. DVM Monitor (Level 3,D,D):
   3: <u>12686</u>   s: <u>1</u>   C: <u>47.00</u>
   9: <u>12662</u>   s: <u>2</u>   B: <u>45</u>
   ☒ DVM (3 & 9) between 9,000-16,000 counts
   ☒ RFI indicator with keyed radio: <u>0 → 1</u>

2. Function (F) Keys:
   ☒ F5 – Tone   ☒ F9 - Fan
   ☒ F6 – Green LED   ☒ F10 – Pump
   ☒ F7 – Red LED   ☒ F11 – Solenoid

3. Atmospheric Monitor (Level 3,D,A): Atmo Sensor, P: <u>948</u>   CF: <u>1.06</u>

4. Flow Monitor (Level 3,D,F): Flow Sensor, R: <u>222</u>   F: <u>0.000</u> L/s

5. Temperature Monitor (Level 3,D,T):
   C: <u>47.0</u>   A: <u>47.5</u>   I: <u>0.0</u>
   B: <u>45.1</u>   V: <u>0.0</u>
   ☒ Cell Temperature (C) between 47 ± 0.02 °C
   ☒ Breath Hose Temperature (B) between 35.5 – 47 °C
   ☒ Internal Ambient Temperature (A) above 41 °C

6. Tank Monitor (Level 3,D,G):   250 AEN 1/30/25
   Display: <u>155</u> psi Regulator: ~~150~~ psi
   Display and Regulator ± 50 psi of each other   (Yes) or (No) AEN 01/30/25
   Gas tank tare necessary?   (Yes) or (No)
   If Yes, display readings after tare (Level 3,M,C,G):
   Display: <u>238</u> psi Regulator: <u>250</u> psi

7. ☒ General Setup (Level 3,S,G)

8. ☒ Configure Start Test (Level 3,S,T)

9. ☒ Network (Level 3,S,N)

E. Tests (Sign and attach all test records):
1. ☒ Configure wet bath simulator for the following test (Level 1,S)
   Zero AC-Wet Calibration Check (Level 1,C):
   Sim ser #: <u>MP3063</u>   Lot #: <u>N/A</u>   Exp date: <u>N/A</u>
   Known value: <u>0.000</u>   AC
   ☒ Results are Zero AC

2. ☒ Configure wet bath simulator for the following test (Level 1,S)
   Low AC-Wet Calibration Check (Level 1,C):
   Known Value ≤ 0.03 AC: <u>0.020</u> AC
   Sim ser #: <u>MP6037</u>   Lot #: <u>2023110</u>   Exp date: <u>28Nov25</u>
   ☒ Results ± 0.005 of known AC

Intoxilyzer 8000 Initial Inspection   Document ID: 11784 Revision: 4
Laboratory Unit: Toxicology Unit - Breath Alcohol Section   Status: Published
Approved By: Laboratory Director   Date Approved: 02/29/2024
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3. ☒ Configure wet bath simulator for the following test (Level 1,S)
   High AC-Wet Calibration Check (Level 1,C):
   Known Value ≥ 0.25 AC: 0.300 AC
   Sim ser #: MP3048 Lot #: 2024-02C Exp date: 14Feb26
   ☒ Results ± 5% of known AC

4. ☒ Configure dry gas standard for the following tests (Level 1,S)
   Known Value: 0.080 AC
   Gas Cylinder Lot #: 0192308043 Cylinder #: 22 Exp. Date: 2/5/2025

5. 0.10% Ethanol + 0.05% Acetone (Level 1,B):
   Sim. Ser #: DR7352 Lot #: ICS 8 Exp. Date: N/A
   ☒ Display reads "Interferent Detect"

6. 0.05% Acetone (Level 1,B):
   Sim. Ser #: DR7111 Lot #: ACE4 Exp. Date: N/A
   ☒ Display reads "Interferent Detect"

7. 0.10% Methanol (Level 1,B):
   Sim. Ser #: DR7345 Lot #: MET4 Exp. Date: N/A
   ☒ Display Reads "Interferent Detect"

8. 0.10% Isopropanol (Level 1,B):
   Sim. Ser #: DR7350 Lot #: IPA3 Exp. Date: N/A
   ☒ Display Reads "Interferent Detect"

9. ☒ Ambient Fail (Level 1,B): Display read and test record correct.

10. ☒ Invalid Sample (Level 1,B): Display read and test record correct.

11. ☒ Sequence Aborted (Level 1,B): Display read test record correct.

12. ☒ ABA (Level 1,B): Test record correct.

13. ☒ Calibration check out of tolerance (CMS mode): Display read and test record correct.

14. ☒ RFI Detected (B,C, or CMS mode): Display read and test record correct.

15. ☒ Tank Pressure Below Minimum (CMS mode): Display reads correct.

16. ☒ Deficient Samples (CMS mode): Display read and test record correct.

17. ☒ Improper Sample (CMS mode): Display read and test record correct.

18. ☒ Difference Too Great (CMS mode): Display read and test record correct.

19. ☒ CMS (CMS mode): Test record correct.

20. Stability Test (Level 3,T,S):
    Ave: 0.0800 Std Dev: 0.0005 Rel Std Dev: 0.04%

Maintenance/Repairs/Notes: N/A
_____
_____
_____
_____

Intoxilyzer 8000 Initial Inspection

Laboratory Unit: Toxicology Unit - Breath Alcohol Section

Approved By: Laboratory Director

UNCONTROLLED WHEN PRINTED

Document ID: 11784 Revision: 4

Status: Published

Date Approved: 02/29/2024

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Instrument is acceptable to be used in the field.   Yes   or   (No)
If No, state reason(s) why:
This instrument has had multiple issues with not turning on, so this instrument will be a classroom only instrument.

_____   _30 January 2025_
Inspector Signature   Date

_____   _31 Jan. 2025_
Reviewer   Date

Intoxilyzer 8000 Initial Inspection   Document ID: 11784 Revision: 4
Laboratory Unit: Toxicology Unit - Breath Alcohol Section   Status: Published
Approved By: Laboratory Director   Date Approved: 02/29/2024
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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 80-004198
Location = TOXL           8164.14.00 09/16
01/29/2025                          13:10

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


12 char/line
abcdefghijkl
ABCDEFGHIJKL


16 char per line
abcdefghijklmnop
ABCDEFGHIJKLMNOP


21 chars per line
abcdefghijklmnopqrstu
ABCDEFGHIJKLMNOPQRSTU


24 characters per line
abcdefghijklmnopqrstuvwx
ABCDEFGHIJKLMNOPQRSTUVWX

32 characters per line
abcdefghijklmnopqrstuvwxyz123456
ABCDEFGHIJKLMNOPQRSTUVWXYZ123456

42 characters per line
abcdefghijklmnopqrstuvwxyz1234567890abcdef
ABCDEFGHIJKLMNOPQRSTUVWXYZ1234567890ABCDEF
```

```
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 #?           28423080A3
Standard Cyl #?           37
Standard Expiration?      11/05/2025
Oper No?                  133237

Flow Cal. Date:           01/09/2012
Slope                     637
Intercept                 -467208

IR Calibration Date:      05/18/2016
                          3um          9um
                     ---------------------
0th Coef(*100):      -19233       -23050

1st Coef(*100):      267031       132119

2nd Coef(*100):      2449         1142

H2O adj(mg/l*10k): 329           398


*********** Test End ***********
```

Operator Signature
ANNA NAREHOOD

Remarks:
Internal Print Test

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 80-004198
Location = TOXL   8164.14.00 09/16
01/29/2025   13:28

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

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

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

Current Instrument Setup
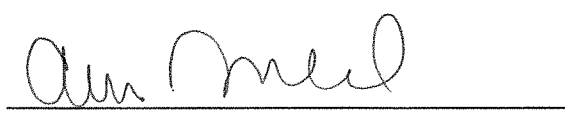Data Entry Mode: Enabled
Start Test Sequence: DABACABA
Display Prelim Rslt?   Yes
Display Third Digit?   Yes
Inhib Printer(Y/N)?   No
Display Volume?   No
Disable On Memfull?   Yes
# of Print Copies?   1
Select Std (D/W/I)?   Dry
Standard Value?   0.080
Standard Lot #?   28423080A3
Standard Cyl #?   37
Standard Expiration?   11/05/2025
Oper No?   133237

Flow Cal. Date: 01/09/2012
Slope   637
Intercept   -467208

IR Calibration Date: 05/18/2016
                            3um   9um

0th Coef(*100):   -19233   -23050
1st Coef(*100):   267031   132119
2nd Coef(*100):   2449   1142
H2O adj(mg/l*10k):   329   398

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

_____
        Operator Signature
        ANNA NAREHOOD

Remarks: External Print Test
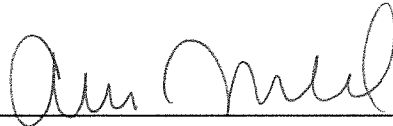
Form 106-I8000

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

CMI, Inc. Intoxilyzer   Alcohol Analyzer
North Dakota Model 8000   SN 80-004198
Location = TOXL   8164.14.00 09/16
01/29/2025   13:26

Test	AC	Time
01 Room Air	0.000	13:26
02 *Subject Test	REF*	13:27
03 Room Air	0.000	13:27

*Subject Test Refused

Sub Name = DISCOVER, THE SPIRIT
Sub DOB = 01/01/1982
Sub Sex = Female   Weight = 150
Test = OTH   Cit = REFUSAL
Dr. Lic. = ND/DIS821456
Lot No = 28423080A3
Cyl No = 37
Expiration Date = 11/05/2025
County = 08   Oper No. = 133237

_____
        Operator Signature
        ANNA NAREHOOD
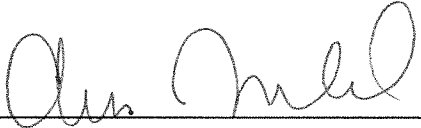
Remarks: Refusal

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 80-004198
Location = TOXL   8164.14.00 09/16
01/29/2025   13:28

```
┌─────────────────────┐
│     DIAGNOSTIC      │
└─────────────────────┘
```

Voltage/Current Test   Pass
RAM Test   Pass
EEPROM Checksum Test   Pass
Real Time Clock Test   Pass
DSP Test   Pass
Analytical Stability Test   Pass
Modem Test   Pass
Temp Regulation Test   Pass

Oper No. = 133237

_____
        Operator Signature
        ANNA NAREHOOD

Remarks: Diagnostic

            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 80-004198
Location = TOXL   8164.14.00 09/16
01/29/2025   13:35

```
┌─────────────────────┐
│   WET CAL CHECK     │
└─────────────────────┘
```

Test	AC	Time
01 Room Air	0.000	13:36
02 Std. Sol.	0.000	13:37
03 Room Air	0.000	13:37
04 Std. Sol.	0.000	13:38
05 Room Air	0.000	13:38
06 Std. Sol.	0.000	13:39
07 Room Air	0.000	13:40

08 Sim Temp = 34.0°C

Simul Ser No = MP3063
Std Sol No = NA
County = 08   Oper No. = 133237

_____
        Operator Signature
        ANNA NAREHOOD

Remarks: zero AC   calibration check
         (0.000AC)

        Form 106-I8000

```
CMI, Inc. Intoxilyzer      Alcohol Analyzer
North Dakota Model 8000       SN 80-004198
Location = TOXL            8164.14.00 09/16
01/29/2025                          13:41
```

```
┌─────────────────────┐
│    WET CAL CHECK    │
└─────────────────────┘
```

Test	AC	Time
01 Room Air	0.000	13:42
02 Std. Sol.	0.020	13:43
03 Room Air	0.000	13:43
04 Std. Sol.	0.020	13:44
05 Room Air	0.000	13:45
06 Std. Sol.	0.021	13:45
07 Room Air	0.000	13:46

08 Sim Temp = 34.0°C

```
Simul Ser No = MP6037
Std Sol No = 202311D
County = 08          Oper No. = 133237
```

Operator Signature
ANNA NAREHOOD

Remarks: Low AC Check
0.020AC

Form 106-I8000

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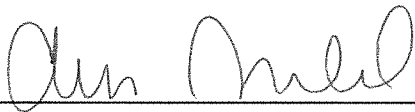NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer   Alcohol Analyzer
North Dakota Model 8000   SN 80-004198
Location = TOXL   8164.14.00 09/16
01/29/2025   14:02

```
┌─────────────────────┐
│   WET CAL CHECK     │
└─────────────────────┘
```

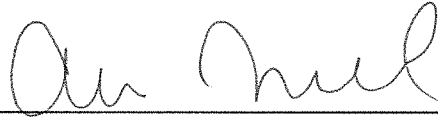| Test	AC	Time
01 Room Air	0.000	14:03
02 Std. Sol.	0.296	14:04
03 Room Air	0.000	14:04
04 Std. Sol.	0.298	14:05
05 Room Air	0.000	14:06
06 Std. Sol.	0.298	14:06
07 Room Air	0.000	14:07

08 Sim Temp = 34.0°C

Simul Ser No = MP3048
Std Sol No = 202402C
County = 08   Oper No. = 133237

(Operator Signature)

Operator Signature
ANNA NAREHOOD

Remarks: High AC Check
0.300AC

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 80-004198
           Location = TOXL             8164.14.00 09/16
           01/29/2025                             14:12


              Test                 AC           Time
           ─────────────────────────────────────────────
           01 Room Air           0.000          14:13
           02 *Subject Test      INT*           14:13
           03 Room Air           0.000          14:14


           *Invalid Test
              Interferent Detected

           Sub Name = DISCOVER, THE SPIRIT
           Sub DOB = 01/01/1982
           Sub Sex = Female             Weight = 150
           Test = OTH              Cit = INTERFERENT
           Dr. Lic. = ND/DIS821456
           Lot No = 01923080A3
           Cyl No = 22
           Expiration Date = 02/05/2025
           County = 08              Oper No. = 133237
```

(Operator Signature)

_____

                 Operator Signature
                 ANNA NAREHOOD

Remarks: Interferent check
         0.10% Ethanol + 0.05% Acetone

                 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 80-004198
        Location = TOXL           8164.14.00 09/16
        01/29/2025                           14:16


            Test                AC            Time
        _____

        01 Room Air            0.000          14:16
        02 *Subject Test       INT*           14:17
        03 Room Air            0.000          14:17


        *Invalid Test
           Interferent Detected

        Sub Name = DISCOVER, THE SPIRIT
        Sub DOB = 01/01/1982
        Sub Sex = Female           Weight = 150
        Test = OTH            Cit = INTERFERENT
        Dr. Lic. = ND/DIS821456
        Lot No = 01923080A3
        Cyl No = 22
        Expiration Date = 02/05/2025
        County = 08          Oper No. = 133237
```

Operator Signature
ANNA NAREHOOD

Remarks: 0.05% Acetone
Interferent check

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 80-004198
              Location = TOXL            8164.14.00 09/16
              01/29/2025                            14:18


                  Test                AC            Time
              ─────────────────────────────────────────────
              01 Room Air            0.000          14:18
              02 *Subject Test       INT*           14:19
              03 Room Air            0.000          14:20


              *Invalid Test
                 Interferent Detected

              Sub Name = DISCOVER, THE SPIRIT
              Sub DOB = 01/01/1982
              Sub Sex = Female          Weight = 150
              Test = OTH            Cit = INTERFERENT
              Dr. Lic. = ND/DIS821456
              Lot No = 01923080A3
              Cyl No = 22
              Expiration Date = 02/05/2025
              County = 08          Oper No. = 133237
```
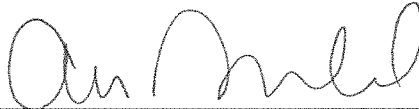
(Operator Signature)

```
              ─────────────────────────────
                    Operator Signature
                    ANNA NAREHOOD
```

Remarks: Interferent check
0.10% Methanol

```
                    Form 106-I8000
```
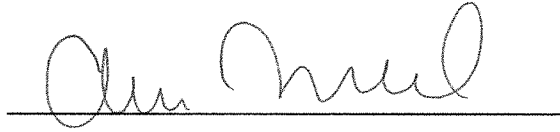
```
             Intoxilyzer Test Record and Checklist
         NDOAG Crime Lab. Div.,  Bismarck, ND 58501

         CMI, Inc. Intoxilyzer      Alcohol Analyzer
         North Dakota Model 8000        SN 80-004198
         Location = TOXL            8164.14.00 09/16
         01/29/2025                             14:35


              Test                 AC           Time
         ─────────────────────────────────────────────
         01 Room Air             0.000          14:36
         02 *Subject Test        INT*           14:37
         03 Room Air             0.000          14:37


         *Invalid Test
            Interferent Detected

         Sub Name = DISCOVER, THE SPIRIT
         Sub DOB = 01/01/1982
         Sub Sex = Female           Weight = 150
         Test = OTH               Cit = INTERFERENT
         Dr. Lic. = ND/DIS821456
         Lot No = 01923080A3
         Cyl No = 22
         Expiration Date = 02/05/2025
         County = 08              Oper No. = 133237
```

(Operator Signature)

                     Operator Signature
                     ANNA NAREHOOD

Remarks: Interferent check
         0.10% Isopropanol
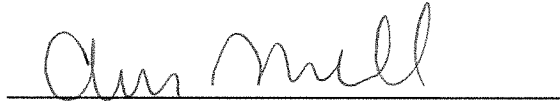

                     Form 106-I8000

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

CMI, Inc. Intoxilyzer   Alcohol Analyzer
North Dakota Model 8000   SN 80-004198
Location = TOXL   8164.14.00 09/16
01/29/2025   14:50

Test	AC	Time
01 Room Air	AMB*	14:50
02 Room Air	0.000	14:51

*Invalid Test
   Check Ambient Conditions

Sub Name = DISCOVER, THE SPIRIT
Sub DOB = 01/01/1982
Sub Sex = Female   Weight = 150
Test = OTH   Cit = AMBIENT
Dr. Lic. = ND/DIS821456
Lot No = 01923080A3
Cyl No = 22
Expiration Date = 02/05/2025
County = 08   Oper No. = 133237

_____
        Operator Signature
        ANNA NAREHOOD

Remarks: Ambient Fail

              Form 106-I8000
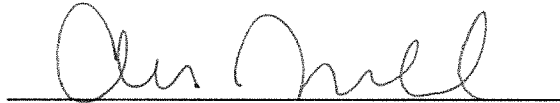
```
          Intoxilyzer Test Record and Checklist
       NDOAG Crime Lab. Div.,  Bismarck, ND 58501

     CMI, Inc. Intoxilyzer      Alcohol Analyzer
     North Dakota Model 8000       SN 80-004198
     Location = TOXL           8164.14.00 09/16
     01/29/2025                          14:55

        Test                   AC            Time
        ─────────────────────────────────────────
     01 Room Air              0.000         14:56
     02 Invalid Sample        X.XXX         14:56
     03 Room Air              0.000         14:57

     *Invalid Test - Mouth Alcohol

     Sub Name = DISCOVER, THE SPIRIT
     Sub DOB = 01/01/1982
     Sub Sex = Female            Weight = 150
     Test = OTH          Cit = INVALID SAMPLE
     Dr. Lic. = ND/DIS821456
     Lot No = 01923080A3
     Cyl No = 22
     Expiration Date = 02/05/2025
     County = 08            Oper No. = 133237
```

```
            Operator Signature
            ANNA NAREHOOD
```

Remarks: Invalid Sample

```
            Form 106-I8000
```
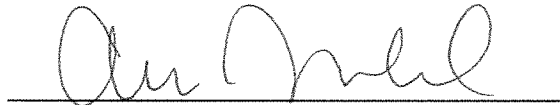
```
         Intoxilyzer Test Record and Checklist
     NDOAG Crime Lab. Div.,  Bismarck, ND 58501

     CMI, Inc. Intoxilyzer     Alcohol Analyzer
     North Dakota Model 8000       SN 80-004198
     Location = TOXL           8164.14.00 09/16
     01/29/2025                           14:58


         Test                  AC          Time
     _____

     01 Room Air             0.000        14:59
     02 *Subject Test        ABT*         14:59
     03 Room Air             0.000        14:59


     *Sequence Aborted

     Sub Name = DISCOVER, THE SPIRIT
     Sub DOB = 01/01/1982
     Sub Sex = Female           Weight = 150
     Test = OTH          Cit = SEQUENCE ABORTE
     Dr. Lic. = ND/DIS821456
     Lot No = 01923080A3
     Cyl No = 22
     Expiration Date = 02/05/2025
     County = 08              Oper No. = 133237
```

(Operator Signature)

         Operator Signature
         ANNA NAREHOOD

Remarks: Sequence Aborted.

            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 80-004198
        Location = TOXL            8164.14.00 09/16
        01/29/2025                           14:59


            Test                  AC           Time
        ─────────────────────────────────────────────
        01 Room Air             0.000         15:00
        02 Subject Test 1       0.000         15:00
        03 Room Air             0.000         15:01

        04 Reported AC          0.000         15:00


               No RFI Detected



        Sub Name = DISCOVER, THE SPIRIT
        Sub DOB = 01/01/1982
        Sub Sex = Female            Weight = 150
        Test = OTH                 Cit = ABA TEST
        Dr. Lic. = ND/DIS821456
        Lot No = 01923080A3
        Cyl No = 22
        Expiration Date = 02/05/2025
        County = 08            Oper No. = 133237
```

(Operator Signature)

_____

                  Operator Signature
                   ANNA NAREHOOD

Remarks: ABA test

                  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 80-004198
        Location = TOXL           8164.14.00 09/16
        01/29/2025                           15:01

             Test                 AC            Time
        _____

        01 Diagnostic           OK            15:02
        02 Room Air             0.000         15:02
        03 Subject Test 1       0.000         15:03
        04 Room Air             0.000         15:05
        05 Std. Gas             0.000*        15:06
        06 Room Air             0.000         15:07

        *Cal Check Out of Tolerance

        Sub Name = DISCOVER, THE SPIRIT
        Sub DOB = 01/01/1982
        Sub Sex = Female            Weight = 150
        Test = OTH            Cit = CAL CHECK OOT
        Dr. Lic. = ND/DIS821456
        Lot No = 01923080A3
        Cyl No = 22
        Expiration Date = 02/05/2025
        County = 08            Oper No. = 133237




        I followed the Approved Method and the
        instructions displayed by the Intoxilyzer
        in conducting this test.
```
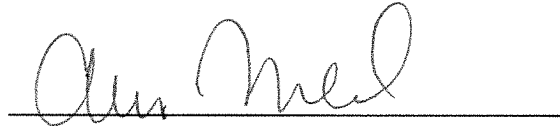
(Operator signature)

```
                 Operator Signature
                 ANNA NAREHOOD
```

Remarks: Calibration check out of tolerance

```
                 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 80-004198
        Location = TOXL            8164.14.00 09/16
        01/29/2025                            15:07

            Test                 AC            Time
        _____

        01 Diagnostic         OK             15:08
        02 Room Air           0.000          15:08
        03 *Subject Test      RFI*           15:08
        04 Room Air           0.000          15:09

        *Invalid Test
           Inhibited - RFI

        Sub Name = DISCOVER, THE SPIRIT
        Sub DOB = 01/01/1982
        Sub Sex = Female           Weight = 150
        Test = OTH                 Cit = RFI TEST
        Dr. Lic. = ND/DIS821456
        Lot No = 01923080A3
        Cyl No = 22
        Expiration Date = 02/05/2025
        County = 08              Oper No. = 133237




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

Operator Signature
ANNA NAREHOOD

Remarks: RFI Test

```
                 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 80-004198
     Location = TOXL            8164.14.00 09/16
     01/29/2025                           15:09


        Test                   AC          Time
     _____

     01 Diagnostic          OK           15:10
     02 Room Air            0.000        15:11
     03 *Subject Test       0.000*       15:14
     04 Room Air            0.000        15:17
     05 Std. Gas            0.079        15:18
     06 Room Air            0.000        15:19
     07 *Subject Test       0.000*       15:22
     08 Room Air            0.000        15:23
           No RFI Detected

     *Deficient Sample - Value Printed was
        Highest Obtained

     Sub Name = DISCOVER, THE SPIRIT
     Sub DOB = 01/01/1982
     Sub Sex = Female          Weight = 150
     Test = OTH               Cit = DEFICIENT
     Dr. Lic. = ND/DIS821456
     Lot No = 01923080A3
     Cyl No = 22
     Expiration Date = 02/05/2025
     County = 08            Oper No. = 133237

     20 minute waiting period ascertained?  Y
     Clean Mouthpiece used and disposed?  Y
     Clean Mouthpiece used and disposed?  Y



     I followed the Approved Method and the
     instructions displayed by the Intoxilyzer
     in conducting this test.
```
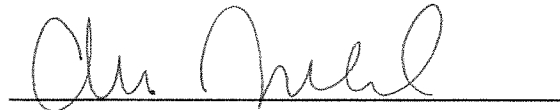
Operator Signature
ANNA NAREHOOD

Remarks: Deficient Samples

```
              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 80-004198
      Location = TOXL            8164.14.00 09/16
      01/29/2025                          15:24

          Test                  AC            Time
      ─────────────────────────────────────────────
      01 Diagnostic           OK            15:24
      02 Room Air             IPS*          15:25
      03 Room Air             0.000         15:25

      *Improper Sample

      Sub Name = DISCOVER, THE SPIRIT
      Sub DOB = 01/01/1982
      Sub Sex = Female              Weight = 150
      Test = OTH          Cit = IMPROPER SAMPLE
      Dr. Lic. = ND/DIS821456
      Lot No = 01923080A3
      Cyl No = 22
      Expiration Date = 02/05/2025
      County = 08             Oper No. = 133237



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

Operator Signature
ANNA NAREHOOD

Remarks: Improper Sample

Form 106-I8000

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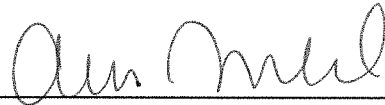NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer   Alcohol Analyzer
North Dakota Model 8000   SN 80-004198
Location = TOXL   8164.14.00 09/16
01/29/2025   15:49

Test	AC	Time
01 Diagnostic	OK	15:50
02 Room Air	0.000	15:50
03 Subject Test 1	0.000*	15:51
04 Room Air	0.000	15:53
05 Std. Gas	0.080	15:55
06 Room Air	0.000	15:56
07 Subject Test 2	0.393*	15:56
08 Room Air	0.000	15:57

*Difference Too Great

Sub Name = DISCOVER, THE SPIRIT
Sub DOB = 01/01/1982
Sub Sex = Female   Weight = 150
Test = OTH   Cit = DIFF TOO GREAT
Dr. Lic. = ND/DIS821456
Lot No = 01923080A3
Cyl No = 22
Expiration Date = 02/05/2025
County = 08   Oper No. = 133237

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

_____
        Operator Signature
        ANNA NAREHOOD

Remarks: Difference Too Great

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 80-004198
            Location = TOXL               8164.14.00 09/16
            01/30/2025                             08:15

               Test                AC            Time
              _____

            01 Diagnostic          OK            08:17
            02 Room Air            0.000          08:17
            03 Subject Test 1      0.000          08:17
            04 Room Air            0.000          08:19
            05 Std. Gas           0.079          08:21
            06 Room Air            0.000          08:22
            07 Subject Test 2      0.000          08:22
            08 Room Air            0.000          08:23


            09 Reported AC         0.000          08:17

                   Difference OK
                   No RFI Detected



            Sub Name = DISCOVER, THE SPIRIT
            Sub DOB = 01/01/1982
            Sub Sex = Female          Weight = 150
            Test = OTH                Cit = CMS TEST
            Dr. Lic. = ND/DIS821456
            Lot No = 01923080A3
            Cyl No = 22
            Expiration Date = 02/05/2025
            County = 08               Oper No. = 133237

            20 minute waiting period ascertained?  Y
            Clean Mouthpiece used and disposed?  Y
            Clean Mouthpiece used and disposed?  Y



            I followed the Approved Method and the
            instructions displayed by the Intoxilyzer
            in conducting this test.
```
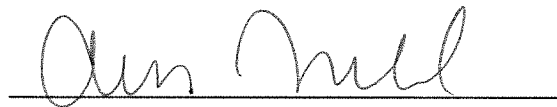
(Operator Signature)

```
                   Operator Signature
                   ANNA NAREHOOD

            Remarks:  CMS Test



                   Form 106-I8000
```

```
CMI, Inc. Intoxilyzer     Alcohol Analyzer
North Dakota Model 8000      SN 80-004198
Location = TOXL           8164.14.00 09/16
01/30/2025                        08:24
```

Test	AC	Time
01 Room Air	0.000	08:25
02 Std. Gas	0.079	08:25
03 Room Air	0.000	08:26
04 Std. Gas	0.079	08:26
05 Room Air	0.000	08:26
06 Std. Gas	0.081	08:27
07 Room Air	0.000	08:27
08 Std. Gas	0.080	08:28
09 Room Air	0.000	08:28
10 Std. Gas	0.080	08:28
11 Room Air	0.000	08:29
12 Std. Gas	0.080	08:29
13 Room Air	0.000	08:30
14 Std. Gas	0.080	08:30
15 Room Air	0.000	08:31
16 Std. Gas	0.080	08:31
17 Room Air	0.000	08:31
18 Std. Gas	0.080	08:32
19 Room Air	0.000	08:32
20 Std. Gas	0.080	08:33
21 Room Air	0.000	08:33
22 Std. Gas	0.080	08:34
23 Room Air	0.000	08:34
24 Std. Gas	0.080	08:34
25 Room Air	0.000	08:35
26 Std. Gas	0.079	08:35
27 Room Air	0.000	08:36
28 Std. Gas	0.080	08:36
29 Room Air	0.000	08:37
30 Std. Gas	0.080	08:37
31 Room Air	0.000	08:37
32 Std. Gas	0.081	08:38
33 Room Air	0.000	08:38
34 Std. Gas	0.080	08:39
35 Room Air	0.000	08:39
36 Std. Gas	0.080	08:39
37 Room Air	0.000	08:40
38 Std. Gas	0.080	08:40
39 Room Air	0.000	08:41
40 Std. Gas	0.080	08:41
41 Room Air	0.000	08:42
42 Cal Check Stats:		
43 Average	0.0800	
44 Std Dev	0.0005	
45 Rel Std Dev	0.64%	

Operator Signature
ANNA NAREHOOD

Remarks: Stability Test

Form 106-I8000