

Chemical Test Operator Name (Print) Joseph Greer #4372			
		Intoxilyzer® Serial Number 80-006507	
Gas Lot Number 01524080A4	Gas Cylinder Number 022		Gas Expiration Date 3/5/2026

Check When Done:

- I. 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.**0 8 🛓** AC
- В. 0.**91 <u>2</u>**АС
- C. 0.082 AC

3. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the Intoxilyzer® for Use.

X 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.

/ DA	
Chemical Test Operator Signature	Date
	2/5/2025
Reviewed By (Crime Laboratory Use Crity)	Date
Anna Narehood	07Feb2025

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

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-006507Location = LAMO8164.14.00 09/1602/05/202516:01

	Y CAL CHECK	
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Test	AC	Time
01 Room Air	0.000	16:02
02 Std. Gas	0.082	16:03
03 Room Air	0.000	16:03
04 Std. Gas	0.082	16:03
05 Room Air	0.000	16:04
06 Std. Gas	0.082	16:04
07 Room Air	0.000	16:05
Lot No = 0152408 Cyl No = 22 Exp Date = 03/05		

'Oper/ No. = 133084

Operator Signature JOSEPH GREER

Remarks:

County = 23

Form 106-18000

The undersigned, having the custody of the original public record, certifies that the information herein is a true and correct copy of the original document maintained as a part of the activities of this office.

Signature / Title 37 Office / Agency_ SC