

# NORTH DAKOTA OFFICE OF ATTORNEY GENERAL CRIME LABORATORY DIVISION

#### INTOXILYZER® 8000 CALIBRATION

Intoxily	zer® 8000 Serial Number: 80-00 4950 Calibration Location: TOX L
	Pre-Calibration  1.  Download Data  2.  Upload Operator File  3.  Battery Check
	Was the external battery pack replaced?  4.
	General Setup and Checks:  1. Diagnostics passed and instrument in "Ready" mode  2. Diagnostics passed and instrument in "Ready" mode  3. Date, time and location code (Level 2,E). Re-set if necessary.  Time Zone: OST or MDT (Time on test records will be in time zone circled).  4. Print test (Level 1,P). Sign and attach test record.  5. Display:
C.	Tests (Sign and attach test records):  1. Configure simulator for the following test (Level 1,S).  Wet Calibration Check - Low AC (Level 1,C)  Known Value ≤ 0.03 AC: 0.020 AC  Sim. Ser #: MP5321  Lot #: 2023110  Exp. Date: 1128 25  Results ± 0.005 of known AC

Intoxilyzer 8000 Calibration

Document ID: 11871 Revision: 3

Laboratory Unit: Toxicology Unit - Breath Alcohol Section

Status: Published

Approved By: Laboratory Director

Date Approved: 02/29/2024

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**AEN** 

2.	Configure simulator for the following test (Level 1,S).  Wet Calibration Check - High AC (Level 1,C)  Known Value ≥ 0.25 AC: 0.300 AC  Sim. Ser #: MP6035  Lot #: 202402C  Exp. Date: 214\26  Results ± 5% AC of known AC					
3.	Configure dry gas standard for the remaining tests (Level 1,S).  Known Value: AC  Gas Cylinder Lot #: 14323080A \ Cylinder #: 69  Exp. Date: (15)25					
4.	Interferent Check (Level 1,B)  Known Value: 0.10AC + 0.05% Acetone Sim. Ser #: DR7352  Lot #: ICS 8  Exp. Date: NIA  Display reads "Interferent Detect"  KRFI Check (CMS Mode)					
5.	Display reads "RFI Detect"					
6.	Dry Calibration Check (Level 1,C)					
D. R	emarks/Maintenance: NIA					
Instrume	nt is acceptable to be used in the field. Yes or No					
If No, state reason(s) why:						
Calibration Analyst Signature  Damuy 2025  Date						
Reviewe	Catibration Analyst Signature  Date  Oslugy 2025  Reviewer  Date					

Intoxilyzer 8000 Calibration

Laboratory Unit: Toxicology Unit - Breath Alcohol Section

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Document ID: 11871 Revision: 3

Status: Published

Date Approved: 02/29/2024

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004950
Location = TOXL 8164.14.00 09/16
04/14/2025 14:11

\*\*\*\*\*\*\* 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 #? 6

Standard Expiration? 11/05/2025 Oper No? 133237

Flow Cal. Date: 01/18/2010 Slope 774 Intercept -908904

IR Calibration Date: 04/19/2024

3um 9um

Oth Coef(\*100): -28189 -35353

1st Coef(\*100): 278200 142117

2nd Coef(\*100): 2249 1342

H2O adj(mg/l\*10k): 369 463

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

Operator Signature
ANNA NAREHOOD

Remarks: Print Test

CMI, Inc. Intoxilyzer Alcohol Analyzer North Dakota Model 8000 Location = TOXL 04/14/2025

SN 80-004950 8164.14.00 09/16 14:40

## WET CAL CHECK

Test			AC	Time
01	Room	Air	0.000	14:40
02	Std.	Sol.	0.018	14:41
03	Room	Air	0.000	14:42
04	Std.	Sol.	0.017	14:42
05	Room	Air	0.000	14:43
06	Std.	Sol.	0.018	14:44
07	Room	Air	0.000	14:44

08 Sim Temp = 34.0°C

Simul Ser No = MP5321 Std Sol No = 202311D

County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks: LOWAL Check - 0.020AC

CMI, Inc. Intoxilyzer North Dakota Model 8000 Location = TOXL 04/14/2025

Alcohol Analyzer SN 80-004950 8164.14.00 09/16 14:51

# WET CAL CHECK

Test			AC	Time
01	Room	Air	0.000	14:51
02	Std.	Sol.	0.293	14:52
03	Room	Air	0.000	14:52
04	Std.	Sol.	0.293	14:53
05	Room	Air	0.000	14:54
06	Std.	Sol.	0.293	14:54
07	Room	Air	0.000	14:55

08 Sim Temp = 34.0°C

Simul Ser No = MP6035 Std Sol No = 202402C

County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

1 ACCHEUK - 0.300 AC

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004950 Location = TOXL 8164.14.00 09/16 04/14/2025

Τe	est	AC	Time 
01	Room Air	0.000	
02	*Subject Test	INT*	14:58
03	Room Air	0.000	14:58

14:56

Interferent Detected

Sub Name = TEST, DONOR2 NONE

Sub DOB = 07/25/1998

Sub Sex = Male Weight = NA Cit = INTERFERENT CK Test = OTH

Dr. Lic. = ND/TES989643

Lot No = 14323080A1

Cyl No = 69

Expiration Date = 06/05/2025

County = 08 Oper No. = 133237

> Operator Signature ANNA NAREHOOD

Remarks: Interferent Check

0.10Ac + 0.05% Acetone

<sup>\*</sup>Invalid Test

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004950
Location = TOXL 8164.14.00 09/16
04/14/2025 14:59

Test	AC	Time
01 Diagnostic	OK	14:59
02 Room Air	0.000	15:00
03 *Subject Test	RFI*	15:00
04 Room Air	0.000	15:01

\*Invalid Test Inhibited - RFI

Sub Name = TEST, DONOR2 NONE

Sub DOB = 07/25/1998

Sub Sex = Male Weight = NA Test = OTH Cit = RFI CHECK

Dr. Lic. = ND/TES989643

Lot No = 14323080A1

Cyl No = 69

Expiration Date = 06/05/2025

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: REI Chulc

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
04/14/2025

SN 80-004950 8164.14.00 09/16 15:01

# DRY CAL CHECK

T	Test		AC	Time
01	Room	Air	0.000	15:02
02	Std.	Gas	0.077	15:02
03	Room	Air	0.000	15:02
04	Std.	Gas	0.078	15:03
05	Room	Air	0.000	15:03
06	Std.	Gas	0.077	15:04
07	Room	Air	0.000	15:04

Lot No = 14323080A1

Cyl No = 69

Exp Date = 06/05/2025

County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks: DM CW Chluc

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
04/14/2025

Alcohol Analyzer SN 80-004950 8164.14.00 09/16 15:05

# DRY CAL CHECK

Test			AC	Time
01	Room	Air	0.000	15:06
02	Std.	Gas	0.078	15:06
03	Room	Air	0.000	15:07
04	Std.	Gas	0.079	15:07
05	Room	Air	0.000	15:08
06	Std.	Gas	0.077	15:08
07	Room	Air	0.000	15:09

Lot No = 14323080A1

Cyl No = 69

Exp Date = 06/05/2025

County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks: Dy Cal Chur #46

CMI, Inc. Intoxilyzer
North Dakota Model 8000
Location = TOXL
04/14/2025

SN 80-004950 8164.14.00 09/16 15:09

## DRY CAL CHECK

Test			AC	Time
01	Room	Air	0.000	15:10
02	Std.	Gas	0.079	15:10
03	Room	Air	0.000	15:11
04	Std.	Gas	0.078	15:11
05	Room	Air	0.000	15:11
06	Std.	Gas	0.078	15:12
07	Room	Air	0.000	15:12

Lot No = 14323080A1

Cyl No = 69

Exp Date = 06/05/2025

County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks: DM CUI CNUL #7-9