	NORTH DAKOTA OFFICE OF ATTORNEY GE	NERAL
	INTOXILYZER® 8000 ANNUAL INSPECT	
Intox	105 1	ction Location: TOXL
Α.	Pre-Inspection 1. Items with Instrument: Gas Cylinder Yes or No (If Yes, Lot # Keys Yes or No Power Cord Yes or No 2. Download Data 3. Dupload Operator File 4. Dupload Operator File 4. Current Location Code: 5. Battery Check Was the external battery pack replaced? 6. O-Rings Replaced Simulator O-Ring Replaced Breath Tube O-Ring	Cyl. #) Yes or No Yes or No
В.	 General Setup and Checks: 1. ☐ Diagnostics passed and instrument in "Ready" model. 2. ☐ Breath tube heated 3. ☐ Date, time and location code (Level 2,E). Re-set in Time Zone: CST or MDT (Time on test record). 4. ☐ Print test (Level 1,P). Sign and attach test record. 5. ☐ Tank monitor (Level 3,D,G). Display:psi Regulator:	ode if necessary. Is will be in time zone circled). psi psi Yes or No
C.	Tests (Sign and attach test records): 1. Quarter Simulator for the following test (Level 1, C) Wet Calibration Check - Low AC (Level 1, C) Known Value ≤ 0.03 AC: 0.020 AC Sim. Ser #: MP5321 Lot #: 2023110 Exp. Date: III 28 25 Results ± 0.005 of known AC	,S). - - - - Document ID: 11698 Revision: 3 Status: Published Date Approved: 03/20/2025
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2.	Configure simulator for the following test (Lev Wet Calibration Check - High AC (Level 1	
	Known Value ≥ 0.25 AC: <u>0.300</u> AC Sim. Ser #: <u>MP6035</u>	
	Lot #:202402C	
	Exp. Date: 2 14/26	
-	Results ± 5% AC of known AC	
3.	Configure dry gas standard for the remaining	tests (Level 1,S).
	Known Value : <u>0.080</u> AC Gas Cylinder Lot #: <u>14323080A4</u>	
	Cylinder #:	
	Exp. Date: 615125	
4.	Interferent Check (Level 1,B)	
	Known Value: 0,10 AC + 0.05% Aceto	ne
	Sim. Ser #: <u>DR1352</u> Lot #:CS %	
	Exp. Date: None	
	Display reads "Interferent Detect"	
5.	RFI Check (CMS Mode)	
	Display reads "RFI Detect"	
6.	Dry Calibration Check (Level 1,C)	
		est 7 0.080
	$1 \text{ est } 2 \underline{0.018}$ 1 est 5 $\underline{0.019}$	Test 8 0.019
	Test 3 <u>0.079</u> Test 6 <u>0.079</u> 1 Average <u>0.079</u>	est 9 0.079
	\boxtimes Results ± 0.005 AC of known AC	
	arks/Maintenance: Instrument Was reported	
scanning	10's and tanks. No issues during Ar	inual inspection.
•		
Instrument i	s acceptable to be used in the field. Yes or No	
If No, state	reason(s) why:	
If Yes chan	ge location code back to A.4 unless A.4 is TOXL.	M
	ge le back to A.+ amess A.+ is TOXE.	
Lux	- MULL	08May2025
Inspector Si		Date 08 May 2025
Janell	e Putschiller	08 hay 2021
Reviewer		Date
Intoxilyzer	r 8000 Annual Inspection	Document ID: 11698 Revision
Laborator	y Unit: Toxicology Unit - Breath Alcohol Section	Status: Publish

cument ID: 11698 Revision: 3 Status: Published Date Approved: 03/20/2025 Page 2 of 2 AEN

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Approved By: Laboratory Director

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CMI, Inc. Intoxilyzer	Alcohol Analyzer
North Dakota Model 8000	SN 80-004954
Location = TOXL	8164.14.00 09/16
05/08/2025	10:14

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

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

Current Instrument Setup Data Entry Mode: Start Test Sequence: Display Prelim Rslt? Display Third Digit? Inhib Printer(Y/N)? Display Volume? Disable On Memfull? # of Print Copies? Select Std (D/W/I)? Standard Value? Standard Lot #? Standard Cyl #? Standard Expiration? Oper No?	Enabled DABACABA Yes Yes No No Yes 1 Dry 0.080 14323080A4 10 06/05/2025 133237
Flow Cal. Date: Slope Intercept	08/27/2012 670 -570610
IR Calibration Date:	04/02/2024

IR Calibration Date	e: 04/02/2	024
	3um	9um
0th Coef(*100):	-20499	-21878
1st Coef(*100):	255404	129613
2nd Coef(*100):	1977	1285
H2O adj(mg/l*10k):	414	417

Operator Signature ANNA NAREHOOD

Remarks:

Print Test

CMI, Inc. Intoxilyzer Alcohol Analyzer North Dakota Model 8000 SN 80-004954 Location = TOXL 8164.14.00 09/16 05/08/2025 10:15

	WET CAL CHECK	
Test	AC	Time
01 Room Air 02 Std. Sol. 03 Room Air 04 Std. Sol. 05 Room Air 06 Std. Sol. 07 Room Air 08 Sim Temp =	0.000 0.020 0.000 0.020 0.000 0.020 0.020 0.000 34.0°C	10:15 10:16 10:17 10:17 10:18 10:19 10:19
Simul Ser No = Std Sol No = 2 County = 08	02311D	No. = 133237
	in mile	l

Operator Signature ANNA NAREHOOD

Remarks:

LOW AC CHECK - 0.020AC

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-004954Location = TOXL8164.14.00 09/16 10:23 05/08/2025

WED	CAL CHECK	
Test	AC	Time
01 Room Air 02 Std. Sol. 03 Room Air 04 Std. Sol. 05 Room Air 06 Std. Sol. 07 Room Air 08 Sim Temp = 34.	0.000 0.293 0.000 0.294 0.000 0.294 0.000	10:23 10:24 10:25 10:25 10:26 10:27 10:27
Simul Ser No = MH Std Sol No = 2024 County = 08	102C	o. = 133237
277 · · · · · · · · · · · · · · · · · ·	ator Signature NA NAREHOOD	Ò
Remarks: High	AC Check-O	.300AC

CMI, Inc. Intoxily North Dakota Model Location = TOXL 05/08/2025	8000 SN 80-	Alcohol Analyzer SN 80-004954 8164.14.00 09/16 10:28	
Test	AC	Time	
01 Room Air	0.000	10:29	
02 *Subject Test	INT*	10:29	
03 Room Air	0.000	10:30	

*Invalid Test Interferent Detected

Sub Name = TEST, DONOR2 NONE Sub DOB = 07/25/1998 Sub Sex = Male Weight = NA Test = OTH Cit = INTERFERENT CK Dr. Lic. = ND/TES989643 Lot No = 14323080A4 Cyl No = 6 Expiration Date = 06/05/2025 County = 08 Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks: Interferent Chelk 0.10AC + 0.05% Acetone

CMI, Inc. Intoxily:	zer	Alcohol Ana	alyzer
North Dakota Model	8000	SN 80-0	
Location = TOXL		8164.14.00	09/16
05/08/2025			10:30
Test	AC		Time
01 Diagnostic	OK		10:31

	Room		RFT*	10:31
02	ROOM	ATT	RF1~	10:31
03	Room	Air	0.000	10:32

*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 = 14323080A4 Cyl No = 6 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:

RFI CNUK

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-004954Location = TOXL8164.14.00 09/1605/08/202510:32

		[DRY CAL CHECK	
Te	est		AC	Time
01	Room	Air	0.000	10:33
02	Std.	Gas	0.079	10:33
03	Room	Air	0.000	10:33
04	Std.	Gas	0.078	10:34
05	Room	Air	0.000	10:34
06	Std.	Gas	0.079	10:35
07	Room	Air	0.000	10:35

Lot No = 14323080A4 Cyl No = 6 Exp Date = 06/05/2025 County = 08

Oper No. = 133237

Operator Signature ANNA NAREHOOD

Remarks: Dry Cal Cherk #1-3

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-004954Location = TOXL8164.14.00 09/1605/08/202510:36

	DRY CAL CHECK			
Time	AC		est	Τe
10:36	0.000	Air	Room	01
10:37	0.079	Gas	Std.	02
10:37	0.000	Air	Room	03
10:37	0.079	Gas	Std.	04
10:38	0.000	Air	Room	05
10:38	0.079	Gas	Std.	06
10:39	0.000	Air	Room	07

Lot No = 14323080A4 Cyl No = 6 Exp Date = 06/05/2025 County = 08

Oper No. = 133237

Operator Signature

ANNA NAREHOOD

cal

cheve #4-6

Remarks: M

CMI, Inc. IntoxilyzerAlcohol AnalyzerNorth Dakota Model 8000SN 80-004954Location = TOXL8164.14.00 09/1605/08/202510:39

	DRY CAL CHECK	Ĺ		
Time	AC	Test		
10:40	0.000	Air	Room	01
10:40	0.080	Gas	Std.	02
10:40	0.000	Air	Room	03
10:41	0.079	Gas	Std.	04
10:41	0.000	Air	Room	05
10:42	0.079	Gas	Std.	06
10:42	0.000	Air	Room	07

Lot No = 14323080A4 Cyl No = 6 Exp Date = 06/05/2025 County = 08

Oper No. = 133237

Cal

Operator Signature ANNA NAREHOOD

chelk #7-9

Remarks: