



NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 6496 Inspection Location: TOXL

A. 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: TOXL
5. Battery Check
 - Was the external battery pack replaced? Yes or No
6. O-Rings
 - Replaced Simulator O-Ring Yes or No
 - Replaced Breath Tube O-Ring Yes or No

B. 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. Tank monitor (Level 3,D,G).
Display: 750 psi Regulator: 750 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. Configure simulator for the following test (Level 1,S).
Wet Calibration Check - Low AC (Level 1,C)
Known Value ≤ 0.03 AC: 0.025 AC
Sim. Ser #: MP3063
Lot #: 202509A
Exp. Date: 9/10/27
 Results ± 0.005 of known AC
2. Configure simulator for the following test (Level 1,S).

Wet Calibration Check - High AC (Level 1,C)

Known Value \geq 0.25 AC: 0.300 AC

Sim. Ser #: MP3003

Lot #: 202408H

Exp. Date: 8/29/26

Results \pm 5% AC of known AC

3. Configure dry gas standard for the remaining tests (Level 1,S).

Known Value : 0.080 AC

Gas Cylinder Lot #: 26-4437

Cylinder #: 104

Exp. Date: 1/29/28

4. Interferent Check (Level 1,B)

Known Value: 0.10 AC + 0.05% Acetone

Sim. Ser #: DR7352

Lot #: 1CS9

Exp. Date: None

Display reads "Interferent Detect"

5. Invalid Sample (Level 1,B)

Display reads "Invalid Sample"

6. RFI Check (CMS Mode)

Display reads "RFI Detect"

7. Dry Calibration Check (Level 1,C)

Test 1 0.080 Test 4 0.081 Test 7 0.081

Test 2 0.081 Test 5 0.081 Test 8 0.082

Test 3 0.081 Test 6 0.081 Test 9 0.082

Average 0.081

Results \pm 0.005 AC of known AC

D. Remarks/Maintenance: NIA

Instrument is acceptable to be used in the field. Yes or No

If No, state reason(s) why: _____

If Yes, change location code back to A.4 unless A.4 is TOXL.

Ali Lynne
Inspector Signature

10 April 2026
Date

Janelle Pertscheller
Reviewer

10 Apr. 2026
Date

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

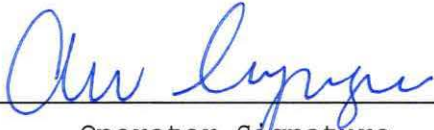
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006496
Location = TOXL 8164.14.00 09/16
04/10/2026 08:47

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	08:48
02 Std. Sol.	0.025	08:49
03 Room Air	0.000	08:49
04 Std. Sol.	0.026	08:50
05 Room Air	0.000	08:50
06 Std. Sol.	0.026	08:51
07 Room Air	0.000	08:52

08 Sim Temp = 34.0°C

Simul Ser No = MP3063
Std Sol No = 202509A
County = 08 Oper No. = 133237


Operator Signature
ANNA INGEMANSEN

Remarks: *LOW AC Check*
0.025AC
Form 106-I8000

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

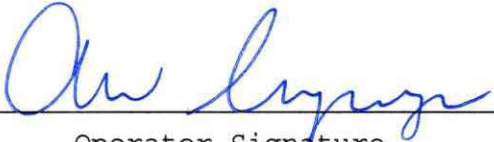
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006496
Location = TOXL 8164.14.00 09/16
04/10/2026 08:53

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	08:53
02 Std. Sol.	0.299	08:54
03 Room Air	0.000	08:55
04 Std. Sol.	0.299	08:56
05 Room Air	0.000	08:56
06 Std. Sol.	0.298	08:57
07 Room Air	0.000	08:58

08 Sim Temp = 34.0°C

Simul Ser No = MP3003
Std Sol No = 202408H
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

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 80-006496
Location = TOXL 8164.14.00 09/16
04/10/2026 08:59

Test	AC	Time
01 Room Air	0.000	08:59
02 *Subject Test	INT*	09:00
03 Room Air	0.000	09:01

*Invalid Test
Interferent Detected

Sub Name = TEST, DONOR2 NONE
Sub DOB = 07/25/1998
Sub Sex = Male Weight = NA
Test = OTH Cit = INTERFERENT
Dr. Lic. = ND/TES989643
Lot No = 264437
Cyl No = 104
Expiration Date = 01/29/2028
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

Remarks: Interferent check
0.10AC + 0.05% Acetone

Form 106-I8000

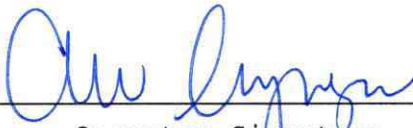
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006496
Location = TOXL 8164.14.00 09/16
04/10/2026 09:07

Test	AC	Time
01 Room Air	0.000	09:09
02 Invalid Sample	X.XXX	09:09
03 Room Air	0.000	09:10

*Invalid Test - Mouth Alcohol

Sub Name = TEST, DONOR2 NONE
Sub DOB = 07/25/1998
Sub Sex = Male Weight = NA
Test = OTH Cit = INVALID
Dr. Lic. = ND/TES989643
Lot No = 264437
Cyl No = 104
Expiration Date = 01/29/2028
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

Remarks: Invalid Sample
Mouth alcohol

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 80-006496
Location = TOXL 8164.14.00 09/16
04/10/2026 09:13

Test	AC	Time
01 Diagnostic	OK	09:14
02 Room Air	0.000	09:14
03 Reference	RFI*	09:14
04 Room Air	0.000	09:15

*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 = 264437
Cyl No = 104
Expiration Date = 01/29/2028
County = 08 Oper No. = 133237

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



Operator Signature
ANNA INGEMANSEN

Remarks: RFI 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 80-006496
Location = TOXL 8164.14.00 09/16
04/10/2026 09:16

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	09:17
02 Std. Gas	0.080	09:17
03 Room Air	0.000	09:18
04 Std. Gas	0.081	09:18
05 Room Air	0.000	09:19
06 Std. Gas	0.081	09:19
07 Room Air	0.000	09:20

Lot No = 264437
Cyl No = 104
Exp Date = 01/29/2028
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

Remarks: DRY Cal check
 #1-3

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 80-006496
Location = TOXL 8164.14.00 09/16
04/10/2026 09:20

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	09:21
02 Std. Gas	0.081	09:21
03 Room Air	0.000	09:21
04 Std. Gas	0.081	09:22
05 Room Air	0.000	09:22
06 Std. Gas	0.081	09:23
07 Room Air	0.000	09:23

Lot No = 264437
Cyl No = 104
Exp Date = 01/29/2028
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

Remarks: Dry cal check
#4-6

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 80-006496
Location = TOXL 8164.14.00 09/16
04/10/2026 09:24

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	09:24
02 Std. Gas	0.081	09:25
03 Room Air	0.000	09:25
04 Std. Gas	0.082	09:26
05 Room Air	0.000	09:26
06 Std. Gas	0.082	09:26
07 Room Air	0.000	09:27

Lot No = 264437
Cyl No = 104
Exp Date = 01/29/2028
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

Remarks: DRY cal check
#7-a

Form 106-I8000