



NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 3071 Inspection Location: TOXL

A. Pre-Inspection

1. Items with Instrument:
 - Gas Cylinder Yes or No (If Yes, Lot # 19825080A2 Cyl. # 21)
 - Keys Yes or No
 - Power Cord Yes or No
2. Download Data
3. Upload Operator File
4. Current Location Code: BOWM
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: 967 psi Regulator: 1000 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: 0.020 AC
Sim. Ser #: MP5290
Lot #: 202501E
Exp. Date: 1/28/27
 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 #: 25024080A3

Cylinder #: 6

Exp. Date: 10/5/26

4. Interferent Check (Level 1,B)

Known Value: 0.10 AC + 0.05% Acetone

Sim. Ser #: DR7352

Lot #: ICS 9

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 0.079 Test 4 0.079 Test 7 0.079

Test 2 0.079 Test 5 0.079 Test 8 0.080

Test 3 0.078 Test 6 0.080 Test 9 0.079

Average 0.079

Results \pm 0.005 AC of known AC

D. Remarks/Maintenance: N/A

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.

Andrew Lyman
Inspector Signature

20 April 2026
Date

Janelle P. Hochler
Reviewer

22 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 80-003071
Location = TOXL 8164.14.00 09/16
04/20/2026 10:02

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

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

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

Current Instrument Setup

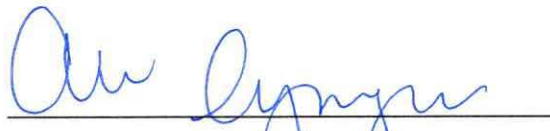
Data Entry Mode: Enabled
Start Test Sequence: DABACABA
Display Prelim Rslt? Yes
Display Third Digit? Yes
Inhib Printer(Y/N)? No
Display Volume? No
Disable On Memfull? Yes
of Print Copies? 1
Select Std (D/W/I)? Dry
Standard Value? 0.080
Standard Lot #? 19825080A2
Standard Cyl #? 21
Standard Expiration? 09/05/2027
Oper No? 133237

Flow Cal. Date: 07/09/2010
Slope 806
Intercept -994737

IR Calibration Date: 04/10/2015
 3um 9um

0th Coef(*100): -11328 -10938
1st Coef(*100): 268087 134278
2nd Coef(*100): 3093 1368
H2O adj(mg/l*10k): 242 233

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


Operator Signature
ANNA INGEMANSEN

Remarks: Pnnt Test

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


CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-003071
Location = TOXL 8164.14.00 09/16
04/20/2026 10:04

WET CAL CHECK

| Test | AC | Time |
|--------------|-------|-------|
| 01 Room Air | 0.000 | 10:05 |
| 02 Std. Sol. | 0.021 | 10:05 |
| 03 Room Air | 0.000 | 10:06 |
| 04 Std. Sol. | 0.020 | 10:07 |
| 05 Room Air | 0.000 | 10:07 |
| 06 Std. Sol. | 0.021 | 10:08 |
| 07 Room Air | 0.000 | 10:08 |

08 Sim Temp = 34.0°C

Simul Ser No = MP5290
Std Sol No = 202501E
County = 08 Oper No. = 133237


Operator Signature
ANNA INGEMANSEN

Remarks: LOW AC Check
0.020 AC

Form 106-I8000

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

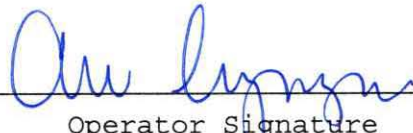
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-003071
Location = TOXL 8164.14.00 09/16
04/20/2026 10:09

WET CAL CHECK

| Test | AC | Time |
|--------------|-------|-------|
| 01 Room Air | 0.000 | 10:10 |
| 02 Std. Sol. | 0.298 | 10:11 |
| 03 Room Air | 0.000 | 10:11 |
| 04 Std. Sol. | 0.298 | 10:12 |
| 05 Room Air | 0.000 | 10:13 |
| 06 Std. Sol. | 0.299 | 10:13 |
| 07 Room Air | 0.000 | 10:14 |

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

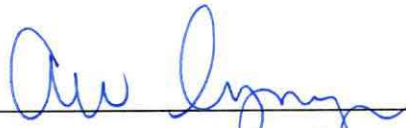
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-003071
Location = TOXL 8164.14.00 09/16
04/20/2026 10:16

| Test | AC | Time |
|------------------|-------|-------|
| 01 Room Air | 0.000 | 10:17 |
| 02 *Subject Test | INT* | 10:17 |
| 03 Room Air | 0.000 | 10:18 |

*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 = 25024080A3
Cyl No = 6
Expiration Date = 10/05/2026
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

Remarks: Interferent check
0.10AC + 0.05% Acetone

Form 106-I8000

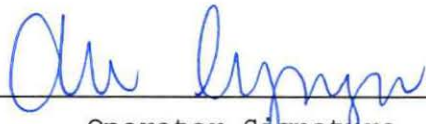
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-003071
Location = TOXL 8164.14.00 09/16
04/20/2026 10:18

| Test | AC | Time |
|-------------------|-------|-------|
| 01 Room Air | 0.000 | 10:19 |
| 02 Invalid Sample | X.XXX | 10:19 |
| 03 Room Air | 0.000 | 10:20 |

*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 = 25024080A3
Cyl No = 6
Expiration Date = 10/05/2026
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

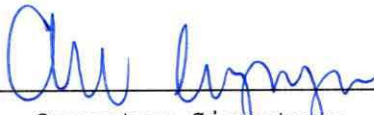
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-003071
Location = TOXL 8164.14.00 09/16
04/20/2026 10:21

| Test | AC | Time |
|------------------|-------|-------|
| 01 Diagnostic | OK | 10:21 |
| 02 Room Air | 0.000 | 10:22 |
| 03 *Subject Test | RFI* | 10:22 |
| 04 Room Air | 0.000 | 10:23 |

*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 = 25024080A3
Cyl No = 6
Expiration Date = 10/05/2026
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

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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 80-003071
Location = TOXL 8164.14.00 09/16
04/20/2026 10:23

DRY CAL CHECK

| Test | AC | Time |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 10:23 |
| 02 Std. Gas | 0.079 | 10:24 |
| 03 Room Air | 0.000 | 10:24 |
| 04 Std. Gas | 0.079 | 10:25 |
| 05 Room Air | 0.000 | 10:25 |
| 06 Std. Gas | 0.078 | 10:26 |
| 07 Room Air | 0.000 | 10:26 |

Lot No = 25024080A3
Cyl No = 6
Exp Date = 10/05/2026
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 80-003071
Location = TOXL 8164.14.00 09/16
04/20/2026 10:27

DRY CAL CHECK

| Test | AC | Time |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 10:27 |
| 02 Std. Gas | 0.079 | 10:28 |
| 03 Room Air | 0.000 | 10:28 |
| 04 Std. Gas | 0.079 | 10:29 |
| 05 Room Air | 0.000 | 10:29 |
| 06 Std. Gas | 0.080 | 10:29 |
| 07 Room Air | 0.000 | 10:30 |

Lot No = 25024080A3
Cyl No = 6
Exp Date = 10/05/2026
County = 08 Oper No. = 133237

Operator Signature
ANNA INGEMANSEN

Remarks: Dry cal check
#4-6

Form 106-I8000

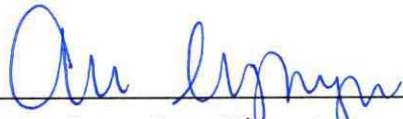
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-003071
Location = TOXL 8164.14.00 09/16
04/20/2026 10:30

DRY CAL CHECK

| Test | AC | Time |
|-------------|-------|-------|
| 01 Room Air | 0.000 | 10:31 |
| 02 Std. Gas | 0.079 | 10:31 |
| 03 Room Air | 0.000 | 10:32 |
| 04 Std. Gas | 0.080 | 10:32 |
| 05 Room Air | 0.000 | 10:33 |
| 06 Std. Gas | 0.079 | 10:33 |
| 07 Room Air | 0.000 | 10:34 |

Lot No = 25024080A3
Cyl No = 6
Exp Date = 10/05/2026
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

Remarks: Dry cal check
#7-9

Form 106-I8000