



NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 7091 Inspection Location: TOXL

A. Pre-Inspection

1. Items with Instrument:
 - Gas Cylinder Yes or No (If Yes, Lot # 08425080A1 Cyl. # 4)
 - Keys Yes or No
 - Power Cord Yes or No
2. Download Data
3. Upload Operator File
4. Current Location Code: MDTT
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: 856 psi Regulator: 900 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 #: 19825080A2

Cylinder #: 20

Exp. Date: 9/5/27

4. Interferent Check (Level 1,B)

Known Value: 0.10 AC + 0.05% Acetone

Sim. Ser #: DR7352

Lot #: ICS9

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 <u>0.078</u>	Test 4 <u>0.079</u>	Test 7 <u>0.079</u>
Test 2 <u>0.078</u>	Test 5 <u>0.079</u>	Test 8 <u>0.079</u>
Test 3 <u>0.078</u>	Test 6 <u>0.079</u>	Test 9 <u>0.079</u>
Average <u>0.078</u>		

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.

[Signature]
Inspector Signature

14 May 2026
Date

[Signature]
Reviewer

15 May 2026
Date

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

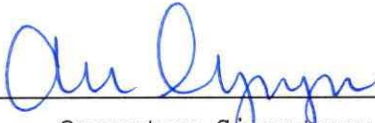
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007091
Location = TOXL 8164.16.00 09/18
05/14/2026 13:06

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:06
02 Std. Sol.	0.019	13:07
03 Room Air	0.000	13:08
04 Std. Sol.	0.019	13:09
05 Room Air	0.000	13:09
06 Std. Sol.	0.019	13:10
07 Room Air	0.000	13:10

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 80-007091
Location = TOXL 8164.16.00 09/18
05/14/2026 13:11

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:13
02 Std. Sol.	0.296	13:14
03 Room Air	0.000	13:15
04 Std. Sol.	0.296	13:16
05 Room Air	0.000	13:16
06 Std. Sol.	0.296	13:17
07 Room Air	0.000	13:17

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 80-007091
Location = TOXL 8164.16.00 09/18
05/14/2026 13:24

Test	AC	Time
01 Room Air	0.000	13:25
02 *Subject Test	INT*	13:25
03 Room Air	0.000	13:26

*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 = 19825080A2
Cyl No = 20
Expiration Date = 09/05/2027
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

Remarks:

Interferent check
0.10AC + 0.05% Acetone

Form 106-I8000

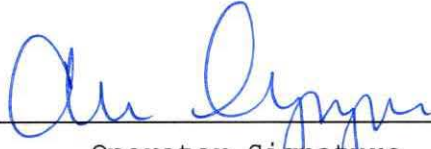
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007091
Location = TOXL 8164.16.00 09/18
05/14/2026 13:35

Test	AC	Time
01 Room Air	0.000	13:35
02 Invalid Sample	X.XXX	13:36
03 Room Air	0.000	13:36

*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 = 19825080A2
Cyl No = 20
Expiration Date = 09/05/2027
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 80-007091
Location = TOXL 8164.16.00 09/18
05/14/2026 13:39

Test	AC	Time
01 Diagnostic	OK	13:40
02 Room Air	0.000	13:40
03 *Subject Test	RFI*	13:40
04 Room Air	0.000	13:41

*Invalid Test
Inhibited - RFI

Sub Name = TEST, DONOR2 NONE
Sub DOB = 07/25/1998
Sub Sex = Male Weight = NA
Test = OTH Cit = RFI
Dr. Lic. = ND/TES989643
Lot No = 19825080A2
Cyl No = 20
Expiration Date = 09/05/2027
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

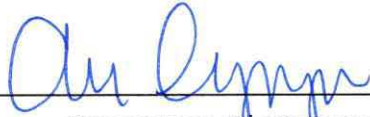
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007091
Location = TOXL 8164.16.00 09/18
05/14/2026 13:45

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:46
02 Std. Gas	0.078	13:46
03 Room Air	0.000	13:47
04 Std. Gas	0.078	13:47
05 Room Air	0.000	13:48
06 Std. Gas	0.078	13:48
07 Room Air	0.000	13:48

Lot No = 19825080A2
Cyl No = 20
Exp Date = 09/05/2027
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

Remarks: *dry cal check*
#1-3

Form 106-I8000

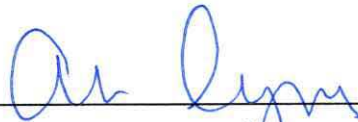
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007091
Location = TOXL 8164.16.00 09/18
05/14/2026 13:49

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:50
02 Std. Gas	0.079	13:50
03 Room Air	0.000	13:51
04 Std. Gas	0.079	13:51
05 Room Air	0.000	13:52
06 Std. Gas	0.079	13:52
07 Room Air	0.000	13:52

Lot No = 19825080A2
Cyl No = 20
Exp Date = 09/05/2027
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 80-007091
Location = TOXL 8164.16.00 09/18
05/14/2026 13:53

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	13:53
02 Std. Gas	0.079	13:54
03 Room Air	0.000	13:54
04 Std. Gas	0.079	13:55
05 Room Air	0.000	13:55
06 Std. Gas	0.079	13:55
07 Room Air	0.000	13:56

Lot No = 19825080A2
Cyl No = 20
Exp Date = 09/05/2027
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

Remarks: Dry Cal Check
#7-9
Form 106-I8000