



NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 7096 Inspection Location: TOXL

A. Pre-Inspection

1. Items with Instrument:
 - Gas Cylinder Yes or No (If Yes, Lot # 08425D80A1 Cyl. # 18)
 - Keys Yes or No
 - Power Cord Yes or No
2. Download Data
3. Upload Operator File
4. Current Location Code: DEVL
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: 953 psi Regulator: 950 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 #: MP529D
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 #: 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 <u>0.079</u>	Test 4 <u>0.079</u>	Test 7 <u>0.080</u>
Test 2 <u>0.079</u>	Test 5 <u>0.079</u>	Test 8 0.080 <u>0.079</u> ^{aei} 5/21/26
Test 3 <u>0.079</u>	Test 6 <u>0.079</u>	Test 9 <u>0.080</u>

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.

Ann Lyman
Inspector Signature

20 May 2026
Date

Janelle Peitschler
Reviewer

21 May 2026
Date

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

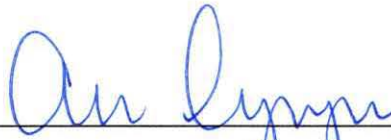
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007096
Location = TOXL 8164.16.00 09/18
05/20/2026 11:17

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	11:18
02 Std. Sol.	0.020	11:19
03 Room Air	0.000	11:19
04 Std. Sol.	0.020	11:20
05 Room Air	0.000	11:20
06 Std. Sol.	0.020	11:21
07 Room Air	0.000	11:22

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
 0.020AC

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 80-007096
Location = TOXL 8164.16.00 09/18
05/20/2026 11:22

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	11:23
02 Std. Sol.	0.304	11:25
03 Room Air	0.000	11:25
04 Std. Sol.	0.304	11:26
05 Room Air	0.000	11:27
06 Std. Sol.	0.304	11:27
07 Room Air	0.000	11:28

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
0.300 AC

Form 106-I8000

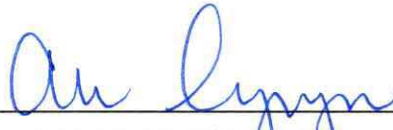
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007096
Location = TOXL 8164.16.00 09/18
05/20/2026 11:29

Test	AC	Time
01 Room Air	0.000	11:30
02 *Subject Test	INT*	11:30
03 Room Air	0.000	11:31

*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
0.10 AC + 0.05% Acetone

Form 106-I8000

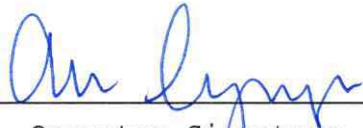
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007096
Location = TOXL 8164.16.00 09/18
05/20/2026 11:37

Test	AC	Time
01 Room Air	0.000	11:37
02 Invalid Sample	X.XXX	11:38
03 Room Air	0.000	11:39

*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 80-007096
Location = TOXL 8164.16.00 09/18
05/20/2026 11:39

Test	AC	Time
01 Diagnostic	OK	11:39
02 Room Air	0.000	11:40
03 *Subject Test	RFI*	11:40
04 Room Air	0.000	11:41

*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 = 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


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NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-007096
Location = TOXL 8164.16.00 09/18
05/20/2026 11:42

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	11:43
02 Std. Gas	0.079	11:43
03 Room Air	0.000	11:44
04 Std. Gas	0.079	11:44
05 Room Air	0.000	11:44
06 Std. Gas	0.079	11:45
07 Room Air	0.000	11:45

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 80-007096
Location = TOXL 8164.16.00 09/18
05/20/2026 11:46

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	11:46
02 Std. Gas	0.079	11:47
03 Room Air	0.000	11:47
04 Std. Gas	0.079	11:48
05 Room Air	0.000	11:48
06 Std. Gas	0.079	11:49
07 Room Air	0.000	11:49

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 80-007096
Location = TOXL 8164.16.00 09/18
05/20/2026 11:49

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	11:50
02 Std. Gas	0.080	11:50
03 Room Air	0.000	11:51
04 Std. Gas	0.079	11:51
05 Room Air	0.000	11:52
06 Std. Gas	0.080	11:52
07 Room Air	0.000	11:53

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



Operator Signature
ANNA INGEMANSEN

Remarks: Dry cal check
#7-9

Form 106-I8000