



**NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION**

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 5360 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: 838 psi Regulator: 850 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 #: 08425080A1

Cylinder #: 23

Exp. Date: 5/5/27

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 0.078 Test 4 0.080 Test 7 0.080

Test 2 0.079 Test 5 0.078 Test 8 0.080

Test 3 0.079 Test 6 0.079 Test 9 0.080

Average 0.079

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

22 May 2026
Date

[Signature]
Reviewer

28 May 2026
Date

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

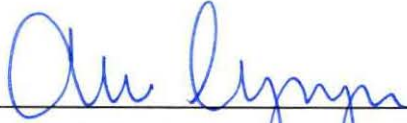
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-005360
Location = TOXL 8164.14.00 09/16
05/22/2026 11:37

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	11:38
02 Std. Sol.	0.018	11:38
03 Room Air	0.000	11:39
04 Std. Sol.	0.019	11:40
05 Room Air	0.000	11:40
06 Std. Sol.	0.019	11:41
07 Room Air	0.000	11:41

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 80-005360
Location = TOXL 8164.14.00 09/16
05/22/2026 11:47

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	11:48
02 Std. Sol.	0.300	11:49
03 Room Air	0.000	11:49
04 Std. Sol.	0.300	11:50
05 Room Air	0.000	11:51
06 Std. Sol.	0.299	11:51
07 Room Air	0.000	11:52

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 80-005360
Location = TOXL 8164.14.00 09/16
05/22/2026 11:56

Test	AC	Time
01 Room Air	0.000	11:57
02 *Subject Test	INT*	11:58
03 Room Air	0.000	11:58

*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 = 08425080A1
Cyl No = 23
Expiration Date = 05/05/2027
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 80-005360
Location = TOXL 8164.14.00 09/16
05/22/2026 11:59

Test	AC	Time
01 Room Air	0.000	12:00
02 Invalid Sample	X.XXX	12:00
03 Room Air	0.000	12:01

*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 = 08425080A1
Cyl No = 23
Expiration Date = 05/05/2027
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 80-005360
Location = TOXL 8164.14.00 09/16
05/22/2026 12:01

Test	AC	Time
01 Diagnostic	OK	12:01
02 Room Air	0.000	12:02
03 Reference	RFI*	12:02
04 Room Air	0.000	12:03

*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 = 08425080A1
Cyl No = 23
Expiration Date = 05/05/2027
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 80-005360
Location = TOXL 8164.14.00 09/16
05/22/2026 12:03

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	12:04
02 Std. Gas	0.078	12:04
03 Room Air	0.000	12:05
04 Std. Gas	0.079	12:05
05 Room Air	0.000	12:06
06 Std. Gas	0.079	12:06
07 Room Air	0.000	12:07

Lot No = 08425080A1
Cyl No = 23
Exp Date = 05/05/2027
County = 08 Oper No. = 133237


Operator Signature
ANNA INGEMANSEN

Remarks: *Loaei 5/22/26 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 80-005360
Location = TOXL 8164.14.00 09/16
05/22/2026 12:11

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	12:12
02 Std. Gas	0.080	12:12
03 Room Air	0.000	12:13
04 Std. Gas	0.080	12:13
05 Room Air	0.000	12:13
06 Std. Gas	0.080	12:14
07 Room Air	0.000	12:14

Lot No = 08425080A1
Cyl No = 23
Exp Date = 05/05/2027
County = 08 Oper No. = 133237



Operator Signature
ANNA INGEMANSEN

Remarks:

*Dry cal check
#7-9*

Form 106-I8000