



NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION

INTOXILYZER® 8000 ANNUAL INSPECTION

Intoxilyzer® 8000 Serial Number: 80-00 6087 Inspection Location: TOXL

A. Pre-Inspection

1. Items with Instrument:
 - Gas Cylinder Yes or No (If Yes, Lot # 25024080A3 Cyl. # 55)
 - Keys Yes or No
 - Power Cord Yes or No
2. Download Data
3. Upload Operator File
4. Current Location Code: PLPD
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: 994 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: 0.025 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 #: 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 0.080 Test 4 0.081 Test 7 0.080

Test 2 0.081 Test 5 0.081 Test 8 0.081

Test 3 0.080 Test 6 0.081 Test 9 0.080

Average 0.080

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

09 April 2026
Date

[Signature]
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 80-006687
Location = TOXL 8164.14.00 09/16
04/09/2026 10:49

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	10:50
02 Std. Sol.	0.025	10:51
03 Room Air	0.000	10:51
04 Std. Sol.	0.025	10:52
05 Room Air	0.000	10:52
06 Std. Sol.	0.025	10:53
07 Room Air	0.000	10:54

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 80-006687
Location = TOXL 8164.14.00 09/16
04/09/2026 10:57

WET CAL CHECK

Test	AC	Time
01 Room Air	0.000	10:57
02 Std. Sol.	0.297	10:58
03 Room Air	0.000	10:59
04 Std. Sol.	0.299	11:00
05 Room Air	0.000	11:00
06 Std. Sol.	0.298	11:01
07 Room Air	0.000	11:01

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 cal check
0.300 AC

Form 106-I8000

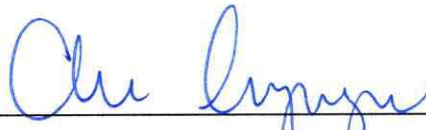
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006687
Location = TOXL 8164.14.00 09/16
04/09/2026 11:03

Test	AC	Time
01 Room Air	0.000	11:03
02 *Subject Test	INT*	11:04
03 Room Air	0.000	11:05

*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

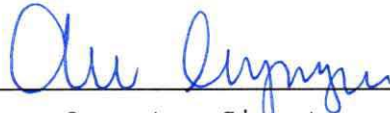
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006687
Location = TOXL 8164.14.00 09/16
04/09/2026 11:05

Test	AC	Time
01 Room Air	0.000	11:06
02 Invalid Sample	X.XXX	11:06
03 Room Air	0.000	11:07

*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

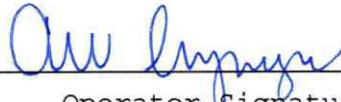
CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006687
Location = TOXL 8164.14.00 09/16
04/09/2026 11:08

Test	AC	Time
01 Diagnostic	OK	11:09
02 Room Air	0.000	11:09
03 *Subject Test	RFI*	11:10
04 Room Air	0.000	11:10

*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 = 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 80-006687
Location = TOXL 8164.14.00 09/16
04/09/2026 11:13

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	11:13
02 Std. Gas	0.080	11:13
03 Room Air	0.000	11:14
04 Std. Gas	0.081	11:14
05 Room Air	0.000	11:15
06 Std. Gas	0.080	11:15
07 Room Air	0.000	11:16

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 80-006687
Location = TOXL 8164.14.00 09/16
04/09/2026 11:18

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	11:18
02 Std. Gas	0.081	11:19
03 Room Air	0.000	11:19
04 Std. Gas	0.081	11:19
05 Room Air	0.000	11:20
06 Std. Gas	0.081	11:20
07 Room Air	0.000	11:21

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 80-006687
Location = TOXL 8164.14.00 09/16
04/09/2026 11:21

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	11:22
02 Std. Gas	0.080	11:22
03 Room Air	0.000	11:23
04 Std. Gas	0.081	11:23
05 Room Air	0.000	11:24
06 Std. Gas	0.080	11:24
07 Room Air	0.000	11:24

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