



INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT
 NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
 CRIME LABORATORY DIVISION-TOXICOLOGY SECTION/BREATH ALCOHOL PROGRAM
 SFN 59281 (06/2018)

Serial Number 80-004201	Instrument Location SHER
Reason for Install/Repair	
<input checked="" type="checkbox"/> Install After Receiving From Crime Laboratory <input type="checkbox"/> Install After Location Change <input type="checkbox"/> Other (Specify) _____	

Check When Done:

- 1. Surge Protector Installed/Property Grounded.
- 2. Telephone Line Connected to Intoxilyzer® 8000.
- 3. Breath Tube Heated.
- 4. Enter Preliminary Data (i.e. Date, Time, DST (Y), and Location; Level 2, Function E).
- 5. Scan/Enter Gas Cylinder Information (Level 1, Function S).
- 6. Run Tests:
 - A. Print Test (Level1, Function P).
 - B. ACA Test (Level 1, Function C).
 - C. Radio Frequency Interference (RFI) Test (CMS Mode or Level 1, Function B or C; Key Radio During Test).
- 7. Repair and/or Maintenance Performed (if any): _____
- 8. Complete the Top Portion of the Intoxilyzer® Record (SFN50496, Form 120-G) and Place it by the Intoxilyzer® for Use.
- 9. File Previous Intoxilyzer® Record (SFN504096, Form 120-G) at the Intoxilyzer® Location at the Agency.
- 10. Send the Following to the Crime Laboratory: Completed Intoxilyzer® 8000 Installation and Repair Checkout (SFN59281, Form 104-G), Print Test, ACA Test, and RFI Test.

Field Inspector Signature <i>[Signature]</i>	Date 05/23/2026
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Crime Laboratory Use Only

This installation has been reviewed and the instrument is approved to be used for the analysis of breath to determine alcohol concentration from the date the Field Inspector performed the installation. This record on file at the Office of Attorney General, Crime Laboratory Division, in the County of Burleigh, North Dakota, is certified to be a true and correct copy of the documents received.

Reviewed/Certified By Anna Ingemansen <i>[Signature]</i>	Certified Date 16June2026
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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 80-004201
Location = SHER 8164.14.00 09/16
05/23/2026 20:18

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

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

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

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 #? 029
Standard Expiration? 09/05/2027
Oper No? 020320

Flow Cal. Date: 04/25/2018
Slope 580
Intercept -164747

IR Calibration Date: 04/26/2018
 3um 9um

0th Coef(*100): -26833 -28328
1st Coef(*100): 272526 132392
2nd Coef(*100): 3966 1397
H2O adj(mg/l*10k): 561 514

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



Operator Signature
TRENT NASER

Remarks:

Form 106-I8000

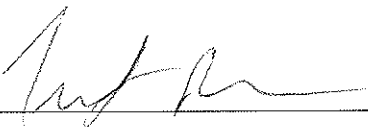
Intoxilyzer Test Record and Checklist
NDOAG Crime Lab. Div., Bismarck, ND 58501

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-004201
Location = SHER 8164.14.00 09/16
05/23/2026 20:23

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	20:23
02 Std. Gas	0.078	20:24
03 Room Air	0.000	20:24
04 Std. Gas	0.079	20:25
05 Room Air	0.000	20:25
06 Std. Gas	0.079	20:25
07 Room Air	0.000	20:26

Lot No = 19825080A2
Cyl No = 029
Exp Date = 09/05/2027
County = 42 Oper No. = 020320



Operator Signature
TRENT NASER

Remarks:

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 80-004201
Location = SHER 8164.14.00 09/16
05/23/2026 20:27

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	20:28
02 Std. Gas	0.079	20:28
03 Room Air	RFI*	20:29
04 Room Air	0.000	20:29

*Invalid Test
Inhibited - RFI

Lot No = 19825080A2
Cyl No = 029
Exp Date = 09/05/2027
County = 42 Oper No. = 020320



Operator Signature
TRENT NASER

Remarks:

Form 106-I8000