INTOXILYZER® 8000 INSTALLATION AND REPAIR CHECKOUT

NORTH DAKOTA OFFICE OF ATTORNEY GENERAL
CRIME LABORATORY DIVISION - TOXICOLOGY UNIT - BREATH ALCOHOL SECTION
SFN 59281 (05/2026)

Serial Number	Instrument Location
80-006506	Mandan

REASON FOR INSTALL/REPAIR

☒ Install After Receiving From Crime Laboratory ○ Install After Location Change
○ 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:
AEI 17Nov26
  ☒ A. Print Test (Level 1, 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) - Specify: _____
☒ 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 (SFN50496, 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	Date
[signature]	11/5/26

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 (print name)	Reviewed/Certified By Signature	Certified Date
Anna Ingemansen	Anna Ingemansen	17Nov2026

Checklist number 6 was checked by Anna Ingemansen. All tests are accounted for on the following pages. This does not affect the installation of the instrument. AEI 17Nov2026

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

CMI, Inc. Intoxilyzer Alcohol Analyzer
North Dakota Model 8000 SN 80-006506
Location = MAND 8164.14.00 09/16
11/05/2026 16:31

********** 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 #?	264944
Standard Cyl #?	304
Standard Expiration?	05/12/2028
Oper No?	020611
Flow Cal. Date:	08/20/2015
Slope	657
Intercept	-627881
IR Calibration Date:	08/20/2015

	3um	9um
0th Coef(*100):	-22470	-18919
1st Coef(*100):	266505	136109
2nd Coef(*100):	3702	1644
H2O adj(mg/l*10k):	709	510

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



Operator Signature
TOM SHARP

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 80-006506
Location = MAND — 8164.14.00 09/16
11/05/2026 — 16:31

DRY CAL CHECK

Test	AC	Time
01 Room Air	0.000	16:32
02 Std. Gas	0.081	16:32
03 Room Air	0.000	16:33
04 Std. Gas	0.080	16:33
05 Room Air	0.000	16:34
06 Std. Gas	0.080	16:34
07 Room Air	0.000	16:34

Lot No = 264944
Cyl No = 304
Exp Date = 05/12/2028
County = 30 — Oper No. = 020611



Operator Signature
TOM SHARP

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 80-006506
Location = MAND 8164.14.00 09/16
11/05/2026 16:36

DRY CAL CHECK

Test	AC	Time
01 Room Air	RFI*	16:36
02 Room Air	RFI*	16:36

*Invalid Test
Inhibited - RFI

Lot No = 264944
Cyl No = 304
Exp Date = 05/12/2028
County = 30 Oper No. = 020611



Operator Signature
TOM SHARP

Remarks:

Form 106-I8000