

RETURN & REPAIR FORM



NJ State Police

CUSTOMER Don P. Cust. # _____

Date ret. 9/29 Carrier Fed Exp Method FCow RMA# _____

7110 Serial# ARLM-0279 Warranty exp.: _____

Reported Problem: _____

- Accessories (check all that apply):
- Regulator
 - P.Paper
 - Scotty V
 - PrinterRib.
 - Pouch
 - Sim.Temp.Probe Ser.# _____
 - Keyboard
 - Organizer
 - Key
 - Mouthpieces _____
 - Sim. to cuvette hose
 - Pump to Sim. hose
 - Power cord
 - Other (specify) _____
 - Other (specify) _____

<u>Part#</u>	<u>Description</u>	<u>\$</u>	<u>Qty</u>	<u>Total</u>
		Repair Time		Time \$

TOTAL REPAIR \$ _____

REPAIR NOTES:

Full QC & Ops CHK

TO NJ 3.2 11-29-99 + Full QC + Ops ✓ AGAIN

Date 11/29/99 Technician ETW

Every above checked item is included Shipping _____