

Return & Repair Form:

Customer Information:

Company Name: NJSP Lab B: _____ S: _____
 Date Received: 4/30/2010 Date Given to Service: _____
 Carrier: FedEx - UPS - DHL - USPS Method: GRD - NDA 2DY 3DY - Other

Product Information:

Product: 7410-7110-6510-6810-7510
 9510- Drug Tester 5000
 Description: A - B - Plus - Screener - Demo
 Serial #: ARNK - 0044
 Printer Ser #: AR -
 Whole Instrument Top 1/2 Sim Ser #: _____
 Other _____ Probe Ser # DD P -
ACCESSORIES:
 110 V A/C Adapter Regulator Mag Card Rdr# _____
 Printer Paper Printer Ribbon Casio # _____
 Mouthpieces Carrying Case Dry Gas
 Other (Please Specify) _____ Warranty Exp. Date _____

Repair Information:

Test #

Reason for Return: _____

Part Number	Description	Qty	Total Cost
<u>MP Cal 71</u>	<u>Cal</u>	<u>1</u>	<u>N/C W</u>
<u>MP Cal 60</u>	<u>Cal 60</u>	<u>.5</u>	<u>N/C W</u>

Repair Notes:

Their was a dried liquid spot on cuvette. mirror, seal removed spot.

Cal w/ ac & Ops Check

Service Technician: JS

Date: 4/30/2010