

Return & Repair Form:

Customer Information:

Company Name: 50. Brunswick PD B: _____ S: _____
 Date Received: 4/19/2011 Date Given to Service: 4/19/2011
 Carrier: FedEx - UPS - DHL - USPS Method: GRD - NDA - 2DY 3DY - Other

Product Information:

Product: 7410-7110-6510-6810-7510 Serial #: ARNK - 0074
 9510- Drug Tester 5000
 Description: A - B - Plus - Screener - Demo 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>680 8455</u> | <u>FC</u> | <u>1</u> | <u>w/c w</u> |
| <u>mp cal 71</u> | <u>Cal</u> | <u>1</u> | <u>w/c w</u> |
| | | | |
| | | | |
| <u>mp Labor</u> | <u>Labor</u> | <u>.5</u> | <u>w/c w</u> |

Repair Notes:

FC # ARCA-1068
Cal w/OC; ops check

Service Technician: [Signature]

Date: 4/20/2011