

Return & Repair Form:

Customer Information:

Company Name: Floor Home Police B: _____ S: _____
 Date Received: 6-18-09 Date Given to Service: _____
 Carrier: FedEx - UPS - DHL - USPS Method: GRD - NDA - 2DY - 3DY - Other

Product Information:

Product: 7410 7110 - 6510 - 6810 Serial #: AR UM - 0077
 Description: A - B - Plus - Screener - Demo Printer Ser #: AR -
 Whole Instrument Top ½ 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 warr</u>
<u>0808455</u>	<u>FL</u>	<u>1</u>	<u>n/c warr</u>
<u>0808486</u>	<u>Plate</u>	<u>1</u>	<u>n/c warr</u>
<u>MP Laba</u>	<u>Labal</u>	<u>0.5</u>	<u>n/c warr</u>

Repair Notes:

Replace FL
Cal w/ ac & Oys Check

Service Technician: [Signature]

Date: 06/19/2009