

Return & Repair Form

Customer Information:

Company Name: Linden Police Dept B: _____ S: _____

Date Received: 4-11-08 Date Given to Service: _____

Carrier: FedEx - UPS - DHL - USPS Method: GRD - NDA - 2DY - 3DY - Other

Product Information:

Product: 7410 - 7110 - 6510 - 6810

Serial #: AR WA - 0178

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: FC

Part Number	Description	Qty	Total Cost
<u>6808455</u>	<u>FC</u>	<u>1</u>	<u>w/c work</u>
<u>6808486</u>	<u>PLATE</u>	<u>1</u>	<u>w/c work</u>
<u>MPCAL 71</u>	<u>7110 CAL</u>	<u>1</u>	<u>w/c work</u>
<u>MPLABOR</u>	<u>LABOR</u>	<u>.5</u>	<u>w/c work</u>

Repair Notes:

REPLACE FC & PLATE

CAL w/ QC & OPS CHECKS

Service Technician: _____

Date: 04-13-08