

Return & Repair Form:

Customer Information:

Company Name: Oxford Tap PD B: _____ S: _____
 Date Received: 7-23-2009 Date Given to Service: _____
 Carrier: FedEx UPS - DHL - USPS Method: GRD - NDA - 2DY - 3DY - Other

Product Information:

Product: 7410 7110 - 6510 - 6810 Serial #: AR WF - 0393
 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>6809458</u>	<u>Detector</u>	<u>1</u>	<u>N/C WARR</u>
<u>6808486</u>	<u>Plate</u>	<u>1</u>	<u>N/C WARR</u>
<u>6808455</u>	<u>FC</u>	<u>1</u>	<u>N/C WARR</u>
<u>MP CAL 71</u>	<u>Cal</u>	<u>1</u>	<u>N/C WARR</u>
<u>MP Labor</u>	<u>Labor</u>	<u>.5</u>	<u>N/C WARR</u>

Repair Notes:

Replace FC / IR Detector
Cal w/ Ac & Ops Check
PERFORMED 99 ADDITIONAL STAND-CHECKS - ALL TESTS
ARE WITHIN SPECIFICATION

Service Technician: [Signature]

Date: 7-24-2009