

Dräger safety

Return & Repair Form

Customer Information:

CUSTOMER Borough of Lehigh Bradstone Cust # _____
 Date of Return: 03 11 2008 Carrier: FX UPS DHL USPS Method: GRD NDA 2DY 3DY
 OTHER: Standard

Product Information:

Product : 7110 7410 6510 6810 Serial # AR WJ - 0005
 Description: A B PLUS SCREENER Printer Serial # AR -
 Whole Inst. Top Half Simulator Serial # _____
 OTHER : _____ Probe Serial # DD P -
 Demo Unit Returned to stock on: _____
 Accessories: (check all that apply):
 110VAC Adapter Regulator Mag Card Rdr # _____
 Printer Paper Printer Ribbon Casio # _____
 Mouthpieces Carrying Case Dry Gas
 Other (specify): _____
 Warranty Expiration Date: _____

Repair Information:

Test # _____

Reason for Return: _____

Part #	Description	Qty	Total
<u>6808455</u>	<u>FC</u>	<u>1</u>	<u>N/C WARR</u>
<u>MPCAL71</u>	<u>7110 CAC</u>	<u>1</u>	<u>N/C WARR</u>
<u>MPLABOR</u>	<u>LABOR</u>	<u>.5</u>	<u>N/C WARR</u>

Repair Notes: REPLACED FC / CAC w/ QC OPS CHECKS

Technician: [Signature]

Date: 03.11.08