

Return & Repair Form

Customer Information:

P.O

Company Name: North Haledon Twp B: _____ S: _____

Date Received: 9-16-08 Date Given to Service: _____

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

Product Information:

Product: 7410 - 7110 - 6510 - 6810 Serial #: AR WM - 0024

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:

Reason for Return: IR RESULTS (+ EC RESULTS?) Test # _____

Part Number	Description	Qty	Total Cost
<u>MPMISC</u>	<u>IR FILTER</u>	<u>1</u>	<u>N/C WARR</u>
<u>6809458</u>	<u>DETECTOR</u>	<u>1</u>	<u>N/C WARR</u>
<u>6808455</u>	<u>FC</u>	<u>1</u>	<u>N/C WARR</u>
<u>6808486</u>	<u>PLATE</u>	<u>1</u>	<u>N/C WARR</u>
<u>MPLAL71</u>	<u>CAL</u>	<u>1</u>	<u>N/C WARR</u>
<u>MPLLABOR</u>		<u>1 HR</u>	<u>N/C WARR</u>

Repair Notes:

REPLACE IR FILTER - SMALL SCRATCHES / REPLACE DETECTOR /
REPLACE FC (OLD CELL = WJ) NEW CELL = ZE / REPLACE PLATE
CAL w/ QC & OPS CHECKS

Service Technician: [Signature]

Date: 09-18-08