

Return & Repair Form:

Customer Information:

Company Name: Bryann Turp P.O. B: _____ S: _____

Date Received: 8-9-09 Date Given to Service: _____

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

Product Information:

Product: 7410 - 7110 - 6510 - 6810

Serial #: AR XA - 0036

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:

NEW CUvette Test #

Reason for Return: _____

Part Number	Description	Qty	Total Cost
<u>6809500</u>	<u>CUvette</u>	<u>1</u>	<u>N/C WARR</u>
<u>6809512</u>	<u>Grommet with Ventil</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:

Replaced CUvette
Cal w/Qc ; Ops check

Service Technician: [Signature]

Date: 09-02-09