

Return & Repair Form:

Customer Information:

Company Name: Carroll County Police Dept. B: _____ S: _____

Date Received: 5-12-09 Date Given to Service: _____

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

Product Information:

Product: 7110 6510 - 6810 Serial #: AR XC - 0091

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 # _____

Mouthpiece Carrying Case Dry Gas

Other (Please Specify) _____ Warranty Exp. Date _____

Repair Information:

Test #

Reason for return: _____

Part Number	Description	Qty	Total Cost
<u>6808455</u>	<u>FC</u>	<u>1</u>	<u>N/C w/warr</u>
<u>MP Cal 71</u>	<u>Cal</u>	<u>1</u>	<u>N/C w/warr</u>
<u>MP Labor</u>	<u>Labor</u>	<u>.5</u>	<u>N/C w/warr</u>

Repair Notes:
Re place FC
Cal w/OC & Ops Check

Service Technician: [Signature]

Date: 05-14-2009