

Return & Repair Form:

Customer Information:

Company Name: Cal. Codes Interstate Hwy. P.O. B: 7793 S:

Date Received: 9-27-10 Date Given to Service: _____

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

Product Information:

Product: 7410-7110-6510-6810-7510 Serial #: AR X0 - 0010
 9510- Drug Tester 5000
 Description: A - B - Plus - Screener - Demo Printer Ser #: AR -
 Whole Instrument Top ½ 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 Jan. 2014

Repair Information:

Test #

Reason for Return:			
<u>FC</u>			
Part Number	Description	Qty	Total Cost
<u>6808455</u>	<u>FC</u>	<u>1</u>	<u>N/C</u>
<u>MP Cal 71</u>	<u>Cal</u>	<u>1</u>	<u>N/C</u>
<u>MP labor</u>	<u>labor</u>	<u>.5</u>	<u>N/C</u>

Repair Notes:

FC# AEBE-1034

New capture

cal w/pc; ops check

Service Technician: [Signature]

Date: 9-29-2010