

Return & Repair Form:

Customer Information:

Company Name: Boro of Hall of E. Rutherford, NJ B: 78734 S: _____
 Date Received: 5-25-10 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 XE-0079
 9510- Drug Tester 5000
 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 JAN. 2014

Repair Information:

Test #

Reason for Return:		Qty	Total Cost
<u>FL</u>			
Part Number	Description		
<u>6808455</u>	<u>FL</u>	<u>1</u>	<u>N/C W</u>
<u>MP CAL 71</u>	<u>CAL</u>	<u>1</u>	<u>N/C W</u>
<u>MP Labor</u>	<u>Labor</u>	<u>.5</u>	<u>N/C W</u>

Repair Notes:

NEW FL # AR3D-2085
CAL w/DC's ops check

Service Technician: JS

Date: 05-26-2010