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Department					<del></del>		<b>——</b>	VT			<del></del>	
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			MONTH	DAY	
	VIAMED	ency Call C	Dut :	Yes	
		Normal Call Out		Yes	No
		Warranty Repair		Yes	No
	Telephone Cross Hills (0535) 634542	Office Repair	/	Yes	No
File No.			eived		Done
łospital	INT = INITIALS OF PERSON	pods te		*****	Done
Town	CARRYING OUR REPAIR	1e			
Department Equipment Type	TWO DIGITS I.E. 01, 02	essories Rece	ived		
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	LARGE ITEMS SHOULD BE LABELED OR TAGGICUSTOMER REPAIR	ED -		•	
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	COMPLAINT LETTERS, TEST OR QA SHEETS ACCOMPANY EQUIPMENT IN PLASTIC ENVELO	PE .			·
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X	15. STATION ROAD. CROSS HILLS. KEIGHLEY, WEST YORKSHIRE.		Normal	Call Out	Yes	No
	BD20 7DT		<u> </u>	ty Repair	Yes	No
	Telephone Cross Hills (0535) 634542		Office F	<del>`</del> :	Yes	No
File No.			Call	····	_	1
Hospital		,/-	Goods Date	Received	Work	Done
Town	CALL DENOTES TELEPHONE REQUES	ST /	Time			
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			INT :	YEAR MO	НТИС	DAY	:
	VIAMED		Emerg	jency Call Out	<del> </del> -	Yes	No
	15. STATION ROAD. CROSS HILLS. KEIGHLEY, WEST YORKSHIRE.	·	Norma	al Call Out		Yes	No
	8D20 7DT Telephone Cross Hills (0535) 634542		Warra	nty Repair		Yes	No
	·			Repair	<del></del>	Yes	No
File No.			Call	Receive	ed .	Work	Done
lospital			Date	1			
Town			Time				
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Equipme: Serial Nu	FOR GOODS UNDER WARRANTY REPORT HERE: DATE SUPPLIED		Acces	sories Receive	ed		
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	BD20 7DT Telephone Cross Hills (0535) 634542	w.	 arrar	nty Repair		Yes	·No
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Hospital			oods ite	1160		YVOIK	Done
Town		Tir	ne		·		
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_	NO COMPONENTS USED						
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_	INSTRUMENT CLEANED		$\top$		·		•
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	15, STATION ROAD, CROSS HILL		Normal	Call Out	Yes	No
X	KEIGHLEY, WEST YORKSHIRE BD20 7DT		}	y Repair	Yes	No
	Telephone Cross Hills (0535) 6345	42			-	
		_	Office F	lepair	Yes	No
File No.		_	Goods	Received	Work	Done
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	Teleph		20 7DT s Hills (0535) 6	34542		Warrant	y Repair	•	Yes .	No
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