

Report #: 44655

Date:

| Customer: | | | | | | Robot Model: | | | | MFG #: | | |
|--------------------------------------|--------------|-------------|-------------|-----------|-----------------------|--------------|-------------------------|----------------|----------|-----------|--------------|--|
| Address: | | | | | | | | | | Software: | | |
| | | | | | Control type: | | | | | | | |
| City/State/Zip: | | | | | Hour Meter: Cust. ID: | | | | | | | |
| Requested by: | | | | | Note: | | | | | | | |
| Site Contact: | | | | | Service Technician(s) | | | | | | | |
| Phone: Fax: | | | | | | | | | | | | |
| Servic | e | | | | | | | | | | | |
| Requirements: | | | | | | | | | | | | |
| | | Travel Hrs. | Service | Service | Lunch | Labor | Travel Hrs. | Travel | Tech | Billable | Job Number / | |
| | Date: | to: | Start Time: | End Time: | Hours: | | From: | | Initials | | | |
| | Date. | ιο. | Start Time: | Ena Time: | nours: | Hours: | From: | Hours | initials | Mileage | Work Order | |
| 1 | | | | | | | | | | | | |
| 2 | | | | | | | | | | | | |
| 3 | | | | | | | | | | | | |
| 4 | | | | | | | | | | | | |
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| 6 | | | | | | | | | | | | |
| 7 | | | | | | | | | | | | |
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| 8 | | | | | | | | | | | | |
| 9 | | | | | | | | | | | | |
| | s this Repor | rt: | | | | | | | | | | |
| Service Description: | | | | | | | | | | | | |
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| Result | s: | | | | | | | | | | | |
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| Outstanding Issues: | | | | | | | | | | | | |
| outstanding issues. | | | | | | | | | | | | |
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| Parts F | Replaced: | | | | | | | | | | | |
| | Part Nu | ımber | Descr | iption | Serial | Number | Quantity | MEC # | NG Form | Custo | mer Initials | |
| A. | | | | | | | | | | | | |
| B. | | | | | | | | | | | | |
| C. | | | | | | | | | | | | |
| D. | | | | | | | | | | | | |
| E. | | | | | | | | | | | | |
| Signatures & Acknowledgements | | | | | | | | | | | | |
| organization & Authornicagonicina | | | | | | | | | | | | |
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| | | | | | | | | | | | | |
| Customer Representative Signature | | | | | | | Customer Em | Customer Email | | | | |
| | | | | | | | Customer P.O. / Release | | | | | |
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| Representative Name (Please Print) | | | | | | | | | | | | |