

**REPAIR FORM**

**ATTN:** Service & Maintenance Department

**DATE:** .....

Company name: .....

Department: .....

Contact: .....

Telephone: .....

E-mail: .....

Your reference: .....

Model: .....

Serial number: .....

Specifications / kind of defects:

- |   |                                       |
|---|---------------------------------------|
| <input type="radio"/> No transmission     | <input type="radio"/> Power failure   |
| <input type="radio"/> No receive          | <input type="radio"/> Display failure |
| <input type="radio"/> Signal interference | <input type="radio"/> Housing damaged |
| <input type="radio"/> Otherwise,          | .....                                 |
|   | .....                                 |
|   | .....                                 |

I would like to receive a quotation in advance

If you have any questions or remarks please contact us at [service@flash-services.com](mailto:service@flash-services.com)

**RETURN TO:** .....

**ADDRESS:** .....

**DATE:** .....