

NEW JERSEY STATE POLICE
HAMILTON TECHNOLOGY COMPLEX
1200 NEGRON DRIVE SUITE # 400
HAMILTON, NJ 08691

ALCOHOL DRUG TEST UNIT
Phone Number: (609)584-5051 ext. 5608
Fax Number: (609)584-9359



This Fax Contains five Page(s) Including This Cover Page.

Date : June 29, 2010
From : Tpr.I Thomas J. Snyder #5792
To : Barbara at Wall Township Police Records
Fax Number : (732)974-0053
Remarks : If you have any questions feel free to contact me via my cellular phone at (609)947-6695

Cautionary Confidentially Notice:

The material(s) and/or information contained in this facsimile transmission originates from the New Jersey Division of State Police and may be privileged and confidential. It is only for the use of the recipient named on this cover sheet. If you are not the intended recipient or have received it in error, please notify the Alcohol/Drug Test Unit immediately at the telephone number listed above so that arrangements can be initiated for their return. Please not that dissemination,

TO: _____ FAX: _____

Please use this form every time you ship Alcotest components to insure that they are serviced promptly and returned to your office

DRAEGER SAFETY EQUIPMENT RETURN FORM

DATE: 11/17/2008 CONTACT NAME Sgt. Erik Ertle

CUSTOMER BILLING NAME AND ADDRESS PO # Under Warranty

Wall Township Police Department
2700 Allaire Road
Wall, NJ 07719

CUSTOMER SHIP TO NAME AND ADDRESS

Wall Township Police Department
2700 Allaire Road
Wall, NJ 07719

PHONE (732)449-4500

FAX (732)449-1273

REASON FOR SERVICE RETURN: DST Clock _____

ANNUAL CALIBRATION / CERTIFICATION REPAIR x

PLEASE GIVE DESCRIPTION OF ANY PROBLEM(S) YOU ARE HAVING WITH YOUR EQUIPMENT.

Needs new fuel cell.

SERIAL NUMBERS BEING SENT IN

ARXA-0037

PLEASE INSURE YOUR EQUIPMENT, AND SEND TO US BY UPS OR FED EX. WE WILL RETURN YOUR EQUIPMENT BY THE SAME SHIPPING METHOD AS IT WAS SHIPPED TO US. PLEASE INCLUDE THIS FORM IN PACKAGE WITH EQUIPMENT. REMEMBER: NEVER SEND IN YOUR DRY GAS WITH YOUR EQUIPMENT.

SHIP TO:

DRAEGER SAFETY DIAGNOSTICS, INC
4040 WEST ROYAL LANE SUITE # 136
IRVING. TX 75063

PHONE: 866-385-5900
FAX 972-929-1260

Packing Slip

Customer no Order No Order date
 150062190 10315389 11/20/2008

Packing slip no. Ship date
 80407923 11/20/2008

Please reference on inquiries

ship to
 150062190
 TOWNSHIP OF WALL
 ATTN: POLICE DEPARTMENT/ERIK ERTL
 2700 ALLAIRE ROAD
 MONMOUTH COUNTY
 WALL, NJ 07719
 USA

bill to

Your Purchase Order Number

WARRANTY
 Any questions? Please contact:
 ERIKA ESQUEDA

Customer
 TOWNSHIP OF WALL
 ATTN: POLICE DEPARTMENT
 2700 ALLAIRE ROAD
 MONMOUTH COUNTY
 WALL, NJ 07719
 USA

Your sales person

Don Pouliot
 Phone: 973-398-3228

Delivery terms
 FA
 FREIGHT ALLOWED

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Item#	sh. Quant	Part no. Description			
		Ship via: FedEx Express 2Day			
		NOTE: All claims for shortages/defects must be reported within 10 Business days after receipt of order. All returns must have our RMA# clearly marked on the box. Please call Customer Service at 866-385-5900.			
		7110 SERIAL #: ARXA-0037 REPLACED FC / CAL W/ QC & OPS CHECKS			
0010	1 EA	MPCAL71 CALIBRATION CHARGE - 7110 Ordered / Back ordered : 0 / 0 EA			
0020	1 EA	6808455 SENSOR : FUEL CELL Ordered / Back ordered : 0 / 0 EA			

Draeger Safety Diagnostics Inc.
 Accounting Address:
 101 Technology Drive
 Pittsburgh, PA 15275

Remit Wire Transfers To:
 Citizens Bank
 Acct. # 6209426615
 Acct. Name: Draeger Safety Diagnostics Inc.

REMIT TO:
 Draeger Safety Diagnostics Inc.
 P.O. Box 200337
 Pittsburgh, PA 15251-0337

Packing Slip

Customer no Order No Order date
 150062190 10315389 11/20/2008

Packing slip no. **Ship date**
 80407923 11/20/2008

Please reference on inquiries

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Item#	sh. Quant.	Part no. Description			
0030	0.5 H	MPLABOR LABOR CHARGE Ordered / Back ordered : 0.0 / 0.0 H			

CONTROL CHECK

ALCOTEST 7110 MKIIC

SERIAL NO.: ARXA-0037
WALL TOWNSHIP POLICE

CAL. FILE : 00003
CAL. DATE : 09/26/2008
CAL. NO. : 00002
CERT. FILE: 00004
CERT. DATE: 09/26/2008
CERT. NO. : 00001
LIN. FILE : 00005
LIN. DATE : 09/26/2008
LIN. NO. : 00001
SOLN. FILE: 00042
SOLN. DATE: 11/17/2008
SOLN. NO. : 00008
FILE NO. : 00043
FILE DATE : 11/17/2008

DIAGNOSTIC: OK
CTRL. IR : 0.098
CTRL. EC : 0.093
SIM. TEMP.: 33.9°C

CTRL. IR : 0.099
CTRL. EC : 0.094
SIM. TEMP.: 33.9°C
CTRL. IR : 0.099
CTRL. EC : 0.094
SIM. TEMP.: 33.9°C

----- % BAC

DIAGNOSTIC: OK

SIGNATURE OPER:

TRK I J. Snyder 15722
