

CALIBRATION ORDER FORM

Q3 Innovations, LLC 2349 Jamestown Ave., Suite 4 Independence, IA 50644 Tel: 319.334.3412 Fax: 319.334.3421 www.Q3i.com

CUSTOMER INFORMATION (Return Shipping Address)

| Name: | Instructions*: |
|---|---|
| Company Name: | 1. Include this Calibration Order Form filled out completely. |
| Street: | 2. Include only the unit being calibrated. No accessories. |
| City: State: Zip: | 3. Include Calibration Payment: (either by enclosing a check payable to Q3 Innovations, LLC or completing the credit card information below) |
| Phone: () Fax: () | \$19.99 - Slim/ Slim 2/Precision/Elite |
| Email Address: | \$24.99 - ABI/PRO \$29.99 - PT500/PT750 |
| Name of Unit to be Calibrated: | 4. Ship the unit to the following address: |
| Company Unit was purchased from: | (to ensure delivery and tracking of your unit, we strongly recommend that you obtain delivery confirmation with the shipment) |
| Approximate Date of Purchase: | Q3 Innovations, LLC |
| Approximate Date(s) of prior re-calibration: | Attn: Service Center 2349 Jamestown Ave, Suite #4 |
| Did the unit appear to be testing properly during last use? | Technica In 50(44 |
| RETURN SHIPPING OPTIONS: (Please check one) | 5. Your product will be verified, recalibrated and shipped out within 2 business days. |
| UPS Ground* (Free) UPS 3 Day Select* (\$13 | .00) *Q3 Innovations, LLC reserves the right to review all orders at which point we may accept or decline any order for any reason, regardless of any confirmation |
| $\Box \text{ UPS } 2^{\text{nd}} \text{ Day Air}^* (\$17.00) \qquad \Box \text{ UPS Next Day Air}^* (\$40)$ | 0.00) receipt sent by the customer. When returning products, we strongly recommend |
| International Postage (\$10.00) | the use of a carrier that can track packages and calculate correct postage, as we do not accept any returned packages with postage due. Q3 Innovations, LLC is not |
| * Continental USA only | responsible for any damages incurred during shipping to the Service Center. You also assume responsibility for insuring the returned item. Q3 Innovations, LLC retains ownership of all products until payment is received. |

| PAYMENT INFORMATIO | N | |
|---|------------------|--|
| Payment: Credit Card Check Purchase Order (Acceptance of Credit Application required prior to purchase on Net 30 terms) Visa MasterCard Discover | | |
| Credit Card Number: | Expiration Date: | |
| Exact Name on Credit Card: | | |
| Signature: | | |
| (Include billing address of credit card if different than return shipping address) | | |

| FOR OFFICE USE ONLY | |
|---------------------|--|
| Date Re-Calibrated: | |
| Technician: | |

Payment Received: