



Personal Safety and Monitoring Devices

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)

<p>Name: _____</p> <p>Company Name: _____</p> <p>Street: _____</p> <p>City: _____ State: _____ Zip: _____</p> <p>Phone: () Fax: ()</p> <p>Email Address: _____</p> <p>Name of AlcoHAWK® to be Calibrated: _____</p> <p>Company Unit was purchased from: _____</p> <p>Approximate Date of Purchase: _____</p> <p>Approximate Date(s) of prior re-calibration: _____</p> <p>Did the unit appear to be testing properly during last use? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>RETURN SHIPPING OPTIONS: (Please check one)</p> <p><input type="checkbox"/> UPS Ground* (Free) <input type="checkbox"/> UPS 3 Day Select* (\$13.00)</p> <p><input type="checkbox"/> UPS 2nd Day Air* (\$17.00) <input type="checkbox"/> UPS Next Day Air* (\$40.00)</p> <p><input type="checkbox"/> International Postage (\$10.00)</p> <p>* Continental USA only</p>	<p>Instructions*:</p> <ol style="list-style-type: none"> 1. Include this Calibration Order Form filled out completely. 2. Include only the unit being calibrated. No accessories. 3. Include Calibration Payment: (either by enclosing a check payable to Q3 Innovations, LLC or completing the credit card information below) \$19.99 - Slim/ Slim 2/Precision/Elite \$24.99 - ABI/PRO \$29.99 - PT500/PT750 4. Ship the unit to the following address: (to ensure delivery and tracking of your unit, we strongly recommend that you obtain delivery confirmation with the shipment) Q3 Innovations, LLC Attn: Service Center 2349 Jamestown Ave, Suite #4 Independence, IA 50644 5. Your product will be verified, recalibrated and shipped out within 2 business days. <p><small>*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 receipt sent by the customer. When returning products, we strongly recommend 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 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.</small></p>
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PAYMENT INFORMATION	
Payment: <input type="checkbox"/> Credit Card <input type="checkbox"/> Check <input type="checkbox"/> Purchase Order (Acceptance of Credit Application required prior to purchase on Net 30 terms) <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> Service Plan (visit www.q3i.com/support to learn more)	
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: _____