



## Customer Repair Report

|                                 |                           |                          |   |                                  |                 |
|---------------------------------|---------------------------|--------------------------|---|----------------------------------|-----------------|
| Model<br>OTHER                  | Serial Number<br>26041-LS | Manufacture Date         | RMA Number<br>01967   | IRIDEX Service Contact<br>Mark W | Completion Date |
| Customer Name<br>UI Health Care |                           | Customer Number<br>24610 | Repair Type<br><input type="checkbox"/> Warranty <input checked="" type="checkbox"/> non-warranty <input type="checkbox"/> Upgrade <input type="checkbox"/> Other |                                  |                 |

### Customer Description of Problem

Broken emergency button and unit display blinking on and off

### Technician Product Evaluate:

Laser diodes degradation. ( Down rev. optic box) Need new laser head and display.

### Service Performed on Unit:

Waiting for customer approval

### ITEMIZED REPAIR CHARGES

| Part Number      | Price/Unit | Quantity | Description         | Total Price |
|------------------|------------|----------|---------------------|-------------|
| TECHNICIAN HQ    |            | 10       | Technician Labor    | \$ 2,850.00 |
| 10798            |            | 1        | ASSY LASER HEAD SLX | \$ 6,297.82 |
| BILLABLE FREIGHT |            | 1        | BILLABLE FREIGHT    | \$ 201.47   |

|                      |                    |
|----------------------|--------------------|
| <b>TOTAL CHARGES</b> | <b>\$ 9,349.29</b> |
|----------------------|--------------------|

Repaired products may contain reconditioned parts, but those are subject to the same specification and quality control standards applied to new materials and are warranted as such. The labor and parts are guaranteed for 90 days after the ship date of the product. Items not covered in the warranty are stated in the IRIDEX Standard Warranty Statement. Your signature below acknowledges the responsibility for payment of the listed charges.  
Freight and sales tax will be added where applicable.

Print Name:

Signature:

Date: