**Service Form**

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| **Date:** | Jan 10 2020 |
| **Time:** | 10 to 11 |
| **Clinic/Hospital:** | Humber imaging |
| **Department:** | Us |
| **Address:** | 471 collage at |
| **Phone:** | Na |
| **Contact Person:** | Rafiq |
| **System & Quantity:** | Some formats doesnt shows on the PACS |
| **Warranty/ Bill:** | Warranty |
| **Other Information:** | RS80 |