



# QUALITY Weekly Report

Contract #	
Customer	

Make:	Model:	Serial #:	Equipment #:
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Inspection: Check if acceptable in accordance with Compliance Services

Week #:													
All functions operate properly													
Structure and components secure and undamaged													
Safety devices intact and functional													
Operational and safety decals present and legible													
Batteries Charged													
Electrical cord/plug													
Containment tank Qty Pumps:													
Appearance acceptable													
Fire Extinguisher Qty:													
First Aid													

## Manufacture/Model

AED														
S/N	Pad Exp.	Battery Exp.			Placed in Service									

## Weekly Notes:

	Initial
Week 1	
Week 2	
Week 3	
Week 4	
Week 5	
Week 6	
Week 7	
Week 8	
Week 9	
Week 10	
Week 11	
Week 12	