REPAIR REQUEST

SEND EQUIPMENT TO:

Tracer Electronics LLC 6981 Eastgate Blvd. Lebanon, TN 37090



A) Your Return Address: Company Name:_____ Address:_____ City:_____Zip Code_____ Attention:____ Same as Return address:_____ **B) Your Billing Address:** Company Name:_____ Address:_____ City:______Zip Code_____ Attention:_____ C) Your Contact Information: Contact Name:_____Email:_____ Need Estimate: Yes_____ / No_____ D) Your Equipment Information: Manufacturer:_____ Serial No: Model: Included in box: Receiver____ Transmitter____ Clamp____ Leads____ E) Please explain your issues below: