

Recalibration Return Procedure

Please include a copy of this completed form with the instrument you are returning for recalibration.

	Serial Nui			For Calibration	Thermon	neter Only:	
CR10 Radiometer						n your Calibration Certific	ate?
CR20 Radiometer				Yes N		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
CT202 Thermometer				If yes, frequency: _		Months	
Shipping Address:							
Company:						· · · · · · · · · · · · · · · · · · ·	
Technical Contact:							
Shipping Address:							
Telephone:			E-mail: _	 			
Billing Address:	Same as	shipping ad	dress				
Company:							
A/P Contact:							
Billing Address:							
Billing Address: Telephone:							
Telephone:			E-mail: _				
			E-mail: _			Same as shipping addre	
Telephone:	and address	you require	E-mail: _	libration certificate	»:	Same as shipping addre	
Telephone: Please indicate name	and address	you require	E-mail: _	libration certificate): 	Same as shipping addre	ss
Please indicate name Company:	and address	you require	E-mail: _	libration certificate): 	Same as shipping addre	ss
Please indicate name Company: Technical Contact:	and address	you require	e on the reca	libration certificate	:	Same as shipping addre	SS
Please indicate name Company: Technical Contact: Address: Telephone:	and address	you require	E-mail: _ e on the reca E-mail: _	libration certificate): 	Same as shipping addre	SS
Please indicate name Company: Technical Contact: Address:	and address	you require	E-mail: _ e on the reca E-mail: _	libration certificate): 	Same as shipping addre	SS
Please indicate name Company: Technical Contact: Address: Telephone: Special Instructions:	and address	you require	E-mail: _ E-mail: _ E-mail: _	libration certificate	:	Same as shipping addre	SS
Please indicate name Company: Technical Contact: Address: Telephone: Special Instructions: Payment Method: Return Ship Via:	visa	you require	E-mail: _ e on the reca E-mail: _	libration certificate	:	Same as shipping addre	SS
Please indicate name Company: Technical Contact: Address: Telephone: Special Instructions: Payment Method: Return Ship Via:	Visa Account #:	you require	E-mail: _ e on the reca E-mail: _	libration certificate	:	Same as shipping addre	SS
Please indicate name Company: Technical Contact: Address: Telephone: Special Instructions: Payment Method: Return Ship Via: Prepaid Collect	Visa Account #:	you require	E-mail: _ e on the reca E-mail: _	libration certificate	:	Same as shipping addre	SS
Please indicate name Company: Technical Contact: Address: Telephone: Special Instructions: Payment Method: Return Ship Via: Prepaid Collect Credit Card Number:	Visa Account #:	Amex N	E-mail: _ e on the reca E-mail: _ MasterCard	libration certificate	2:	Same as shipping addre	SS

Please submit the form to the appropriate Q-Lab office by clicking below and return the instrument to the address listed (no RGA / RMA number is required for return). Please include a printed copy of this completed form.

Q-Lab Corporation

Attn: Order Desk 800 Canterbury Road Westlake, OH USA 44145 +1-440-835-8700 info@q-lab.com

Submit Form to **Q-Lab Corporation**

Q-Lab Europe

Express Trading Estate Stone Hill Road, Farnworth Bolton BL4 9TP, England +44-1204-861616 info.eu@q-lab.com

Submit Form to Q-Lab Europe

Q-Lab Deutschland GmbH

In den Hallen 30 D - 66115 Saarbrücken, Germany +49-681-857470 vertrieb@q-lab.com

Submit Form to **Q-Lab Deutschland**

Q-Lab China

Room 1001, Yong Ding Building No. 3388 Gong He Xin Road Shanghai, China 200436 +86-21-5879-7970 info.cn@q-lab.com

Submit Form to Q-Lab China