Return To	Advanced BioSystems, Inc.
	Advanced BioSystems, Inc. 7031 SW 22nd Ct - Suite C
	Davie, FL 33317
	800-749-7755
Fax	954-423-1777
Email	service@advanced-biosystems.com



Bill To Address: Company Name Address Line 1 Address Line 2 City / State / Zip City / State / Zip City Make Address Line 2 City / State / Zip	er below:
Contact Person Contact Phone # Date Customer # Purchase Order Bill To Address: Company Name Address Line 1 Address Line 2 City / State / Zip List Item(s) to be repaired (separately). Contact Phone # Repair Authorization For Repair Authori	er below:
Repair Authorization For Date Customer # If using customer's Shipping Acct, enter number UPS FedEx	er below:
Date Customer # Purchase Order Bill To Address: Company Name Address Line 1 Address Line 2 City / State / Zip List Item(s) to be repaired (separately). Serial / Lot Number If using customer's Shipping Acct, enter numb UPS FedEx Ship To Address: Company Name Address: Address Line 1 Address Line 2 City / State / Zip List Item(s) to be repaired (separately). Serial / Lot Number (include as much information a	er below:
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☐ Time & Materials Billing (all fields may not apply) ☐ Flat Rate Billing (not all fields apply) ☐ Diagnostic Fee	
Diagnostic Fee \$85.00 If we complete the repair, the Diagnostic Fee is included in the repair price. Diagnostic Fee Not Applicable PM	
Cost of Parts Repair	
Labor Charge \$96.00 per hour Rebuild	
	11.7
Travel Not Applicable Remanufacture	
S&H Travel	
S&H Travel S&H S&H	
S&H Travel Tax Not Applicable S&H Total Tax	
Travel Travel S&H Travel S&H Travel S&H Travel T	
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S&H Tax Not Applicable S&H Total Payment: Payment Type:	