

REPAIR ORDER FORM

6205 Big Bend Dr Roseville CA 95678 916.771.7879

Doctors Office:	Contact Name:
ITEM 1 MIDWEST KAVO STAR LARES	ADECOTHER
Serial#Problem	
Estimate Repair as needed We will contact yo	ou if rapair is above average
ITEM 2 MIDWEST KAVO STAR LARES	ADECOTHER
Serial#Problem	
Estimate 🔲 Repair as needed 🛮 We will contact yo	ou if repair is above average
ITEM 3 MIDWEST KAVO STAR LARES	ADEC OTHER
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Serial#Problem	
Estimate Repair as needed We will contact yo	ou if repair is above average
ITEM 4 MIDWEST KAVO STAR LARES	ADEC OTHER
Serial#Problem_	
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Estimate Repair as needed We will contact yo	When the transfer of the second
	ou if repair is above average
ITEM 5 MIDWEST KAVO STAR LARES	ADECOTHER
Serial#Problem	
Estimate Repair as needed We will contact yo	ou if repair is above average
Notes	
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^{*}Not Responsible for handpieces left in our possession for more than 6 months