



# Return Material Authorization Form

Complete all numbered sections of this form where applicable and include with item being returned.  
A restocking fee may be applied for returned merchandise.

1. Please contact CMI, Inc. for a Return Material Authorization number. RMA# \_\_\_\_\_

2. Item(s) Returned:  Instrument  Supplies  Other

3. Instrument Model: 8000 Serial Number 80-004952

4. Bill To Address: \_\_\_\_\_ Ship To Address: ND Crime Laboratory  
2641 East Main Ave  
Bismarck ND 58501

5. Reason for Return: Note - If you are sending an item for repair, please give a detailed description of the problem. Please list any special instructions that you may have concerning this return.  
Screw for battery pack will not unscrew from case.  
Brass screw holder spins in place. Please change  
Inter case.  
IF Recalibrate Use Gas Std 0.080 AC

6. Purchase Order Number (attach a copy of P.O. if applicable) \_\_\_\_\_

### Please Choose One of the following Options: 7a, 7b or 7c

7a. I Authorize All Repairs:  Yes  No Under Warranty

7b. I Authorize Repairs Up To: \$ \_\_\_\_\_ Attent: Tom Settles

7c. I Require An Estimate Regardless of Cost  Yes  No

Please contact: Name \_\_\_\_\_  
Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_ email: \_\_\_\_\_

Note: An evaluation fee will apply to estimates that are not repaired.

8. Authorized By: Margy Pearson  
Name (Please Print)

Margy Pearson 2-21-2010  
Signature Date

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FR

**FedEx** US Airbill  
Express

FedEx Tracking Number **8697 8802 6300**

Form ID No. **0215**

Sender's Copy

**1 From** Please print and press hard.  
Date 2-22-10 Sender's FedEx Account Number 2748-4632-1  
Sender's Name Margy Pearson Phone (701) 328-6159  
Company OFFICE OF ATTY GEN CRIME LAB  
Address 2641 E MAIN AVE Dept./Floor/Suite/Room \_\_\_\_\_  
City BISMARCK State ND ZIP 58501-5044

**2 Your Internal Billing Reference** Intox 80-004952  
First 24 characters will appear on invoice.

**3 To**  
Recipient's Name Tom Settles Phone 866 835-0690  
Company CMI, Inc.

Recipient's Address \_\_\_\_\_ Dept./Floor/Suite/Room \_\_\_\_\_  
We cannot deliver to P.O. boxes or P.O. ZIP codes.  
Address 316 East Ninth Street  
To request a package be held at a specific FedEx location, print FedEx address here.  
City Owensboro State Ky ZIP 42303  
80-004952  
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0404348458



**4a Express Package Service** Packages up to 150 lbs.  
 **FedEx Priority Overnight** Next business morning\*\* Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.  
 **FedEx Standard Overnight** Next business afternoon\* Saturday Delivery NOT available.  
 **FedEx First Overnight** Earliest next business morning delivery to select locations.\* Saturday Delivery NOT available.  
 **FedEx 2Day** Second business day\*\* Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected. FedEx Envelope rate not available. Minimum charge: One pound rate.  
 **FedEx Express Saver** Third business day\* Saturday Delivery NOT available.  
\* To most locations.

**4b Express Freight Service** Packages over 150 lbs.  
 **FedEx 1Day Freight\*** Next business day\*\* Friday shipments will be delivered on Monday unless SATURDAY Delivery is selected.  
 **FedEx 2Day Freight** Second business day\*\* Thursday shipments will be delivered on Monday unless SATURDAY Delivery is selected.  
 **FedEx 3Day Freight** Third business day\*\* Saturday Delivery NOT available.  
\* Call for Confirmation. \*\* To most locations.

**5 Packaging**  
 **FedEx Envelope\***  
 **FedEx Pak\*** Includes FedEx Small Pak, FedEx Large Pak, and FedEx Sturdy Pak.  
 **FedEx Box**  
 **FedEx Tube**  
 **Other** \* Declared value limit \$500.

**6 Special Handling** Include FedEx address in Section 3.  
 **SATURDAY Delivery** NOT Available for FedEx Standard Overnight, FedEx First Overnight, FedEx Express Saver, or FedEx 3Day Freight.  
 **HOLD Weekday at FedEx Location** NOT Available for FedEx First Overnight.  
 **HOLD Saturday at FedEx Location** Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.  
 Does this shipment contain dangerous goods?  
One box must be checked.  
 **No**  
 **Yes** As per attached Shipper's Declaration.  
 **Yes** Shipper's Declaration not required.  
 **Dry Ice** Dry Ice, 3 UN 1845 \* \_\_\_\_\_ kg  
 **Cargo Aircraft Only**  
Dangerous goods (including dry ice) cannot be shipped in FedEx packaging.

**7 Payment** Bill to: Enter FedEx Acct. No. or Credit Card No. below.  
 **Sender** Acct. No. in Section 1 will be billed.  
 **Recipient**  
 **Third Party**  
 **Credit Card**  
 **Cash/Check**  
 FedEx Acct. No. 128079580 Exp. Date \_\_\_\_\_  
 Credit Card No. \_\_\_\_\_  

Total Packages	Total Weight	Total Declared Value*
<u>1</u>	<u>44.39</u>	<u>\$ 8000.00</u>

\* Our liability is limited to \$100 unless you declare a higher value. See back for details. By using this Airbill you agree to the service conditions on the back of this Airbill and in the current FedEx Service Guide, including terms that limit our liability.

**8 Residential Delivery Signature Options** If you require a signature, check Direct or Indirect.  
 **No Signature Required** Package may be left without obtaining a signature for delivery.  
 **Direct Signature** Someone at recipient's address may sign for delivery. Fee applies.  
 **Indirect Signature** If no one is available at recipient's address, someone at a neighboring address may sign for delivery. Fee applies.  
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 Rev. Date 10/05/Part #150279-01094-2008 FedEx\*PRINTED IN U.S.A.\*GDF