

Warranty Card Receipt

Number:

Name		Model	
Serial number		Debugging date	
Purchase organization		Vessel name	
End user	Name	Contacts	
	Tel/Mobile	Fax	
	E-mail		
	Others		

* Fill in it correctly. Please send it to our company within schedule time to protect your benefits.



Unit Warranty Card

Name		Model			
Serial number		Debugging date			
Purchase organization		Vessel name			
End user	Name	Contacts			
	Tel/Mobile	Fax			
	Address	Zip			
	E-mail				
Maintenance date	User description	Fault description	Maintenance record	User signature	Maintenance signature
			<div style="border: 1px solid black; padding: 5px; display: inline-block;">Maintenance record</div>		