

Customer Name Dupont E315

Service Order Number 260-1006494

Bill To Same as above

Equipment ID (Tag ID) York Translators ABS

Work Site Experimental Station

Problem Not Communicating

Work Site Address Wilmington, DE

Contact Name/Phone Tom Slivinski

Additional Billing Information REPAIR TALK TRANSLATORS ON YORK ABS chillers #1 & #3 AT E315/POWERHOUSE

Quoted Price/Flat Rate \$ _____ Resolved? Yes Date _____ No

Type of Service:

T&M No Charge RAC PSA# _____ Warranty to Installation # _____ Warranty to S.O. # _____

PAYMENT AUTHORIZATIONS

Purchase Order Number LGG-C096 TS

Printed Name X THOMAS E. SLIWINSKI

Signature [Signature] 5-24-07

Credit Card Type MC VISA AMEX

Card Holder Name

Card Number

Expiration Date

ACTIVITIES

COMMENTS

| Service Agent ID | Activity Type | Reg. Hours | 1.5 OT Hrs. | 2.0 OT Hrs. |
|------------------|---------------|------------|-------------|-------------|
| Walker-J | MC | 4 | | |

Troubleshooting of ABS #1 and ABS #3 York Translators. AT E315 POWERHOUSE

| Date | Miles/Km | Expenses | Explanation |
|---------|----------|----------|-------------|
| 5/16/07 | | \$ | |

| Service Agent ID | Activity Type | Reg. Hours | 1.5 OT Hrs. | 2.0 OT Hrs. |
|------------------|---------------|------------|-------------|-------------|
| | | | | |

| Date | Miles/Km | Expenses | Explanation |
|------|----------|----------|-------------|
| | | \$ | |

| Service Agent ID | Activity Type | Reg. Hours | 1.5 OT Hrs. | 2.0 OT Hrs. |
|------------------|---------------|------------|-------------|-------------|
| | | | | |

| Date | Miles/Km | Expenses | Explanation |
|------|----------|----------|-------------|
| | | \$ | |

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|------------------|---------------|------------|-------------|-------------|
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| Date | Miles/Km | Expenses | Explanation |
|------|----------|----------|-------------|
| | | \$ | |

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|------------------|---------------|------------|-------------|-------------|
| | | | | |

| Date | Miles/Km | Expenses | Explanation |
|------|----------|----------|-------------|
| | | \$ | |

MATERIALS

| PO #: Truck #: F/O # | Vendor | Qty. | Description | Part # |
|----------------------|--------|------|----------------------|--------|
| | | 1 | Consumable Materials | CSM-1 |
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