SERVICE SLIP

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| Name of School: | | | | Date: |  |
| Contact Person: | | Designation: | | Tel. No: | |
| Address: | | | |
| School ID: | |
| Model: | Serial No: | | Action Taken: | | |
| Description: | | |
| Warranty | Out of Warranty | |
| Under Contract | Other Supplier | |
| Complaint(s) | | |
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| QUANTITY | UNIT DESCRIPTION | SERIALNO. | UNIT PROBLEM |
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Requested by:

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School Principal