

# Service Report



**WORK ORDER ID: CWKD4088953**

**WORK ORDER TYPE:** Preventative Maintenance

**CUSTOMER:** KUMC RESEARCH INSTITUTE | **DEPARTMENT:** 190215-KUMC RESEARCH INSTITUTE-ROUNDS RESEARCH INSTITUTE | **ACCOUNT NUMBER:** 190215

**CONTACT:**

**CUSTOMER PO#:**

**CONTACT PHONE:**

**CUSTOMER REFERENCE:**

**BILLING ADDRESS:** PO Box 3160 Kansas City, KS 66103

**SHIPPING ADDRESS:** 4330 Shawnee Mission Pkwy. Ste. #1360 Fairway, KS 66205

**AGILITI ASSET ID :** 1887919 | **SERIAL #:** 4040054 | **VENDOR SITE ID :** | **CUSTOMER ASSET ID:**

**ASSET TYPE:** MIXERS | **MANUFACTURER:** CLAY ADAMS | **MODEL:** LR36025

**SERVICE REQUESTED:** PM Due

**SERVICE PROVIDED TYPE:** Scheduled Maintenance

**WORK COMPLETED:** 01-23-2024

## LABOR

SERVICE PROVIDER	CATEGORY	HOURS	PERIOD DEFINITION	SERVICE DATE
Stephanie Harper	PM Not Covered	0.3	M-F 8-5	01/23/24

## SERVICE PROVIDED DETAILS

Completed SM passed inspection testing RPM 3345

## TEST EQUIPMENT

PREFIX	UNIT	DESCRIPTION	CALIBRATION DATE
TA1	257	TACHOMETER	04/14/23

## CHECKLIST

**PROCEDURE: MIXERS, CLINICAL LABORATORY**

**QUESTION**

- Correct Operation Verification
- Detailed Inspection
- Electrical Safety Inspection
- Lubrication
- Mechanical Safety Inspection

**ANSWER**

- Pass
- Pass
- Pass
- Pass
- Pass

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Customer Signature:

Date:

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Technician Signature:

Date: