

STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
**BREATH TESTING INSTRUMENTATION SERVICE REPORT**

1. Department: <b>Stratford Borough Police Department 315 Union Avenue Stratford NJ, 08084</b>	2. Contact: <b>Chief Morello</b>	4. Date: <b>01/10/2013</b>
	3. Phone Number: <b>856-783-8616</b>	5. County: <b>Camden</b>

6. Alcotest Instrument Serial Number: <b>N/A</b>	7. Simulator Component Serial Number: <b>DDUK S3-0133</b>	8. Temperature Probe Component Serial Number: <b>N/A</b>
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9. Reason for Service:  
**Complaint received that the simulator solution was not being heated to within the proper tolerance.**

10. Comments:  
**Operational condition of the simulator was assessed with my digital thermometer and black key temperature probe. Temperature of the simulator solution was shown to be above the tolerance range and then falling to below the tolerance range.**  
**Simulator placed out of service and returned to Draeger Safety Diagnostics for evaluation.**

- 11. The above Instrument/Component has been found to be in satisfactory working condition; no further action required.
- 12. The above instrument/Component is placed out of service pending further evaluation.
- 13. The above Instrument/Component is placed back in service.

"I have been certified by the Attorney General as a Breath Test Coordinator/Instructor pursuant to N.J.A.C. 13:51, et. seq. In my official capacity as a Breath Test Coordinator/Instructor I perform inspections of evidential breath test devices and related components of evidential breath test systems. I have inspected the evidential breath test device listed on this report in my official capacity. The results of my inspection are recorded on this form. I certify that the forgoing statements made by me are true and accurate to the best of my knowledge. I am aware that if any of the forgoing statements made by me are willingly false, I am subject to punishment."

**Tpr. II Michael P. Gibson #6353**  
Name & Badge Number (Print)

*Tpr. II Michael P. Gibson #6353* 1/10/2013  
Signature Date

# Delivery receipt

Customer no. 150053903    Order no. 2220430997

Delivery receipt no. 517012123    Delivery receipt date 03/12/2018

Please reference on inquiries

Ship to 150053903  
STRATFORD POLICE DEPARTMENT  
ATTN: CHIEF RON MORELLO  
315 UNION AVE  
STRATFORD NJ 08084-1313

Payer 150053903  
STRATFORD POLICE DEPARTMENT  
ATTN: CHIEF RON MORELLO  
315 UNION AVE  
STRATFORD NJ 08084-1313

Your order dated 03/12/2018  
Your order no. MR MCBRIDE

Customer 150053903  
STRATFORD POLICE DEPARTMENT  
ATTN: CHIEF RON MORELLO  
315 UNION AVE  
STRATFORD NJ 08084-1313

Your contact person

Kit Smith  
Tel.: 800-437-2437 #5  
kiamichi.smith@draeger.com

Page 1 / 2

Line	Quant.	Part no.	Description
			Air Waybill No.: 9622001900001029848400430716646261 Applicable to International Orders Only: These items are controlled by the US government and authorized for export only to the country of ultimate destination for use by the ultimate consignee or end-user(s) herein identified. They may not be resold, transferred, or otherwise disposed of, to any other country or to any person other than the authorized ultimate consignee or end-user(s) either in their original form or after being incorporated into other items, without first obtaining approval from the US government or as otherwise authorized by US law and regulations.  Applicable to U.S. Orders Only: Any diversion (e.g. export/re-export, transfer, release, transshipment, etc.) contrary to U.S. law of products that are intended solely for use in the United States is prohibited.

Draeger Inc.  
Our Tax ID: 23-1699096  
3135 Quarry Road, Telford, PA 18969  
An Equal Opportunity Employer M / F / V / H  
Telephone 800-437-2437  
<http://www.draeger.com>

Remit to:  
LOCKBOX (Standard USPS)  
Draeger, Inc.  
PO Box 13369  
Newark, New Jersey  
07101-3362

Remit to:  
LOCKBOX (Overnight)  
FIS Lockbox Processing  
Lockbox #13369  
400A Commerce Blvd  
Carlstadt, NJ 07072  
Phone: 201 460-2823

Remit US Wire Transfers to:  
Account Name: Draeger Inc.  
Account Number: 00-494-936  
Transit Routing: 021001033  
SWIFT: BKTRUS33  
Deutsche Bank Trust Company Americas  
60 Wall Street 25th Fl, New York, NY 10005

# Delivery receipt

Customer no. 150053903    Order no. 2220430997

Delivery receipt no. 517012123    Delivery receipt date 03/12/2018

Please reference on inquiries

Payer  
150053903

Page 2 / 2

Line	Quant.	Part no.	Description
			ORDERED BY MR MCBRIDE 856-783-8616 FOR ORDERS AND INQUIRIES PLEASE SEND AN EMAIL TO DSDIORDERS@DRAEGER.COM
0010	6 EA	4407061	Cert solution, .10% new jersey certified
0020	10 EA	6805700	Mouthpiece Classic w/o valve (25 pcs.)
0030	1 EA	1902937	Freight Charges
			Number of packages



# Service note

Customer no.                      Number of report                      Date of receiving  
 150053903                      302993789                      10/06/2017  
**Please reference on inquiries**

Customer  
 STRATFORD POLICE DEPARTMENT  
 ATTN: CHIEF RON MORELLO  
 315 UNION AVE  
 STRATFORD NJ 08084-1313

Consignee  
 STRATFORD POLICE DEPARTMENT  
 ATTN: CHIEF RON MORELLO  
 315 UNION AVE  
 STRATFORD NJ 08084-1313

Your order  
 Date of order:  
 Your reference:

NL-Text  
 Maintenance device list

Your contact person  
 Aaron Flores  
 aaron.flores@draeger.com

Page 1

Item	Quantity	Part no. Description
		<b>Service Order: 118369061</b>
		COE000950
		Eq.No. : 1021735381 SN: DDUJP2-030
		Material: 4412025 Simulator, temperature probe
		Inv.No. :
		Location:
	0.0	<b>COE000950</b>
		R018 Repair time - Core
		<b>Service Order: 118369060</b>
		COE000950
		Eq.No. : 1020916870 SN: DDULS3-0163
		Material: 4540083 Simulator,CU34 110V elec ctrl w/c tmeter
		Inv.No. :
		Location:
	0.0	<b>COE000950</b>
		R018 Repair time - Core
	1 EA	4412034 Hose pump-sim w/sim-cuvette hose 2"

**Draeger Inc.**  
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 3135 Quarry Road; Telford, PA 18969  
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 Telephone 800-437-2437  
 http://www.draeger.com

Remit to:  
**LOCKBOX (Standard USPS)**  
 Draeger, Inc.  
 PO Box 13369  
 Newark, New Jersey  
 07101-3362

Remit to:  
**LOCKBOX (Overnight)**  
 FIS Lockbox Processing  
 Lockbox #13369  
 400A Commerce Blvd  
 Caristadt, NJ 07072  
 Phone: 201 460-2823

Remit US Wire Transfers to:  
 Account Name: Draeger Inc.  
 Account Number: 00-494-936  
 Transit Routing: 021001033  
 SWIFT: BKTRUS33  
 Deutsche Bank Trust Company Americas  
 60 Wall Street 25th Fl, New York, NY 10005

## Delivery receipt



Customer no.  
150053903

Number of report  
302993789

Please reference on inquiries

Date of receiving    Delivery receipt date  
/    /    10/06/2017

Consignee  
**STRATFORD POLICE DEPARTMENT**  
**ATTN: Sgt. Stephen McBride**  
**315 UNION AVE**  
**STRATFORD NJ 08084-1313**

Customer  
**STRATFORD POLICE DEPARTMENT**  
**ATTN: Sgt. Stephen McBride**  
**315 UNION AVE**  
**STRATFORD NJ 08084-1313**

Your order

Date of order:

Purch.ord.no.:

Branch text

Draeger contact person

Aaron Flores

aaron.flores@draeger.com

Page 1

Quantity	Description	Part no.	Equipment - No.	Serial - No.
001	Simulator, temperature probe	4412025	1021735381	DDUJP2-030
001	Simulator,CU34 110V elec ctr	4540083	1020916870	DDULS3-0163

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<http://www.draeger.com>

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**LOCKBOX (Standard USPS)**  
Draeger, Inc.  
PO Box 13369  
Newark, New Jersey  
07101-3362

Remit to:  
**LOCKBOX (Overnight)**  
FIS Lockbox Processing  
Lockbox #13369  
400A Commerce Blvd  
Carlstadt, NJ 07072  
Phone: 201 460-2823

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Account Name: Draeger Inc.  
Account Number: 00-494-936  
Transit Routing: 021001033  
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60 Wall Street 25th Fl, New York, NY 10005

STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
**BREATH TESTING INSTRUMENTATION SERVICE REPORT**

1. Department: <b>Stratford Police Department 315 Union Avenue Stratford, NJ 08084</b>	2. Contact: <b>Chief Morello</b>  3. Phone Number: <b>856-783-8616</b>	4. Date: <b>01/05/2017</b>  5. County: <b>Camden</b>
6. Alcotest Instrument Serial Number: <p style="text-align: center;"><b>ARNK-0039</b></p>	7. Simulator Component Serial Number: <p style="text-align: center;"><b>N/A</b></p>	8. Temperature Probe Component Serial Number: <p style="text-align: center;"><b>N/A</b></p>

9. Reason for Service:  
**Complaints received regarding error code "(035) EC-SYSTEM" being displayed on the instrument's LCD screen.**

10. Comments:  
**Operational condition of the instrument was assessed by viewing the instrument's LCD screen which displayed "(035) EC-SYSTEM."**  
  
**Instrument was placed out of service and returned to Draeger Safety Diagnostics for evaluation.**

Last Known Sequential File #: 02407

11. The above Instrument/Component has been found to be in satisfactory working condition; no further action required.
12. The above Instrument/Component is placed out of service pending further evaluation.
13. The above Instrument/Component is placed back in service.

"I have been certified by the Attorney General as a Breath Test Coordinator/Instructor pursuant to N.J.A.C. 13:51, et. seq. In my official capacity as a Breath Test Coordinator/Instructor I perform inspections of evidential breath test devices and related components of evidential breath test systems. I have inspected the evidential breath test device listed on this report in my official capacity. The results of my inspection are recorded on this form. I certify that the forgoing statements made by me are true and accurate to the best of my knowledge. I am aware that if any of the forgoing statements made by me are willingly false, I am subject to punishment."

Trooper II Matthew R. Watson #7078 <small>Name &amp; Badge Number (Print)</small>	 <small>Signature</small>	#7078 1/5/17 <small>Date</small>
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# Packing Slip

Customer no    Order No    Order date  
 150053903    10858512    01/19/2017

Packing slip no.    Ship date  
 81036261    01/19/2017

Please reference on inquiries

Ship to

150053903  
 STRATFORD POLICE DEPARTMENT  
 ATTN: CHIEF MORELLO  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084-1313  
 USA

Payer

Your Purchase Order Number

01/19/2017  
 17-00063  
 Any questions? Please contact:  
 ROSEMARIE HUGHES

Customer

STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084-1313  
 USA

Your sales person

CHRISTOPHER FAIRCHILD  
 Phone: 866-385-5900  
 Fax: 972-929-1260

Delivery terms

FA  
 FREIGHT ALLOWED

Page 1 / 2

Item#	sh. Quant.	Part no. Description
		Ship via: Fed Ex Saver
		NOTE: All claims for shortages/defects must be reported within 10 Business days after receipt of order. All returns must have our RMA# clearly marked on the box. Please call Customer Service at 866-385-5900.
		7110:ARNK-0039 REC'D 1/8/17
0010	1 EA	4414161 CALIBRATION, 7110 Ordered / Back ordered : 1 / 0 EA
0020	0.5 EA	4414166 HOURLY LABOR CHARGE Ordered / Back ordered : 0.5 / 0.0 EA

**Draeger Safety Diagnostics Inc.**  
 Accounting Address:  
 3135 Quarry Road  
 Telford, PA 18969 USA  
 Toll-free: +1-800-437-2437  
 Fax: +1-215-721-5410

**Remit Wire Transfers To:**  
 Citizens Bank  
 Acct. # 6209426615  
 Acct. Name: Draeger Safety Diagnostics Inc.  
 Transit Number: 036076150  
 Federal ID Number: 84-1600159

**REMIT TO:**  
 Draeger Safety Diagnostics Inc.  
 P.O. Box 536410  
 Pittsburgh, PA 15253-5906

# Packing Slip

Customer no    Order No    Order date  
150053903    10858512    01/19/2017

Packing slip no.    Ship date  
81036261    01/19/2017

Please reference on inquiries

Page    2 / 2

Item#	sh. Quant.	Part no. Description			
0030	1 EA	6808455 SENSOR : FUEL CELL Ordered / Back ordered : 1 / 0 EA			
0040	2 EA	6808486 PLATES, 7110--9510 Ordered / Back ordered : 2 / 0 EA			
0050	1 EA	MPINS INSURANCE AND HANDLING CHARGE Ordered / Back ordered : 1 / 0 EA			
0060	1 EA	FREIGHT FREIGHT TO DRAEGER Ordered / Back ordered : 1 / 0 EA			
0070	1 EA	FREIGHT FREIGHT TO AGENCY. Ordered / Back ordered : 1 / 0 EA			



# RETURN AND REPAIR FORM



## Customer Information

B:

S:

Company Name: Stratford P.D., Stratford, NJ

Date Received: 01/09/2017

Date given to service: 01/09/2017

Carrier:  FedEx  UPS  USPS

Shipping Method:  GRD  3DAY  2DAY  
 NDA-PRI  NDA-STD

Product:  6510  6810  
 7110  8610  
 7510  DT5000  
 7410 Upper-half  9510  
 7410 Whole

Serial Number: AR NK-0039

Printer Serial#: AR

Sim Serial#: DD

Probe Serial#: DD

Warranty Expires: \_\_\_\_\_

Description:  A  B  Plus  Demo  Screener  Trade In

## Accessories

110V A/C Adapter  Regulator  Printer Ribbon  Printer Paper  
 Mouthpieces  9510 Stylus  9510 Top Cover  Carrying Case  
 Dry Gas  Other (please specify) \_\_\_\_\_

## Repair Information:

Test#:

Part Number	Description	Qty	Total Cost
4414161	Calibration	1	
4414166	Labor	.5	
6808455	Fuel Cell	1	
6808486	Spacer Plates	2	

Repair Notes: Replaced defective fuel cell and spacer plates.

Fuel Cell = ARJH-1556

CAL W/QC AND OPS CHECK

Service Technician BC

Date: 01/18/2017

STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
**BREATH TESTING INSTRUMENTATION SERVICE REPORT**

1. Department: <b>Stratford Police Department 315 Union Ave Stratford, NJ 08084</b>	2. Contact: <b>Chief Morello</b>  3. Phone Number: <b>856-783-8616</b>	4. Date: <b>01/31/2017</b>  5. County: <b>Camden</b>
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6. Alcotest Instrument Serial Number: <b>ARNK-0039</b>	7. Simulator Component Serial Number: <b>N/A</b>	8. Temperature Probe Component Serial Number: <b>N/A</b>
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9. Reason for Service:  
**The Alcotest instrument was returned from outside evaluation and placed back in service.**

10. Comments:  
**See Draeger Return and Repair form.**

STATE OF NEW JERSEY

Last Known Sequential File #: N/A

- 11. The above Instrument/Component has been found to be in satisfactory working condition; no further action required.
- 12. The above Instrument/Component is placed out of service pending further evaluation.
- 13. The above Instrument/Component is placed back in service.

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<u>Tpr. II Matthew R. Watson #7078</u> <small>Nama &amp; Badge Number (Print)</small>	<u>Tpr. II  #7078</u> <small>Signature</small>	<u>01/31/2017</u> <small>Date</small>
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# Packing Slip

Customer no: 150053903    Order No: 10716582    Order date: 07/28/2014

Packing slip no: 80877314    Ship date: 07/28/2014  
Please reference on inquiries

Ship to: 150053903  
STRATFORD POLICE DEPARTMENT  
CAMDEN COUNTY  
315 UNION AVENUE  
STRATFORD, NJ 08084  
USA

Bill to: [Empty Box]

Your Purchase Order Number:  
07/28/2014  
SGT STEPHEN MCBRIDE  
Any questions? Please contact:  
CHARLES ROBINSON II

Customer:  
STRATFORD POLICE DEPARTMENT  
CAMDEN COUNTY  
315 UNION AVENUE  
STRATFORD, NJ 08084  
USA

Your sales person:  
Don Pouliot  
Phone: 973-398-3228

Delivery terms:  
FA  
FREIGHT ALLOWED

Item#	sh. Quant.	Part no. Description
		Ship via: Fed Ex Ground
		NOTE: All claims for shortages/defects must be reported within 10 Business days after receipt of order. All returns must have our RMA# clearly marked on the box. Please call Customer Service at 266-385-5900.
		SIM:DDULS3-0163 PROBE:DDUJP2-0303 RECEIVED 07/28/2014
0010	1 EA	MPCERT CERTIFICATION CHARGE SIMULATOR Ordered / Back ordered : 1 / 0 EA
0020	1 EA	MPCALTP CAL. CHARGE, SIM PROBE Ordered / Back ordered : 1 / 0 EA

**Draeger Safety Diagnostics Inc.**  
Accounting Address:  
101 Technology Drive  
Pittsburgh, PA 15275  
Tel: (412) 788-5537  
Fax: (412) 788-5598

**Remit Wire Transfers To:**  
Citizens Bank  
Acct. # 6209426615  
Acct. Name: Draeger Safety Diagnostics Inc.  
Transit Number: 036076150  
Federal ID Number: 84-1600159

**REMIT TO:**  
Draeger Safety Diagnostics Inc.  
P.O. Box 200337  
Pittsburgh, PA 15251-0337

# Packing Slip

Customer no    Order No    Order date  
150053903    10716582    07/28/2014

Packing slip no.    Ship date  
80877314    07/28/2014  
Please reference on inquiries

Page    2 / 2

Item#	sh. Quant	Part no. Description			
0030	1 EA	12043 HOSE PUMP-SIM W/SIM-CUVETTE HOSE 2" Ordered / Back ordered : 1 / 0 EA			
0040	1 EA	FREIGHT Freight Charges Ordered / Back ordered : 1 / 0 EA			
0050	1 EA	4540023 GASKET, SIM JAR, 4"ODX.139"WALL, #240 Ordered / Back ordered : 1 / 0 EA			

# Packing Slip

Customer no    Order No    Order date  
 150053903    10625703    05/16/2013

Packing slip no.    Ship date  
 80774643    05/16/2013

Please reference on inquiries

ship to  
 150053903  
 STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

bill to

Your Purchase Order Number  
 05/16/2013  
 SGT MCBRIDE  
 Any questions? Please contact:  
 MARA HERRERA

Customer  
 STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

Your sales person  
 Don Pouliot  
 Phone: 973-398-3228

Delivery terms  
 FA  
 FREIGHT ALLOWED

Item#	sh. Quan	Part no. Description
		Ship via: Fed Ex Ground
		NOTE: All claims for shortages/defects must be reported within 10 Business days after receipt of order. All returns must have our RMA# clearly marked on the box. Please call Customer Service at 866-385-6900.
		SIM: DDQLS3-10*63 PROBE: DDUJP2-030
0010	1 EA	MPCERT CERTIFICATION CHARGE SIMULATOR Ordered / Back ordered : 1 / 0 EA
0020	1 EA	MPCALTP CAL CHARGE, SIM PROBE Ordered / Back ordered : 1 / 0 EA

**Draeger Safety Diagnostics Inc.**  
 Accounting Address  
 101 Technology Drive  
 Pittsburgh, PA 15275  
 Tel: (412) 788-5537  
 Fax: (412) 788-5598

Remit Wire Transfers To:  
 Citizens Bank  
 Acct. # 6209426615  
 Acct. Name: Draeger Safety Diagnostics Inc.  
 Transit Number: 036078150  
 Federal ID Number: 84-1600158

REMIT TO:  
 Draeger Safety Diagnostics Inc  
 P O Box 200337  
 Pittsburgh, PA 15251-0337

# Packing Slip

Customer no    Order No    Order date  
150053903    10625703    05/16/2013

Packing slip no.    Ship date  
80774643    05/16/2013

Please reference on inquiries

Page    2 / 2

Item#	sh. Quant	Part no. Description			
0030	1 EA	12043 HOSE PUMP-SIM W/SIM-CUVETTE HOSE 2" Ordered / Back ordered : 1 / 0 EA			
0040	1 EA	FREIGHT Freight Charges Ordered / Back ordered : 1 / 0 EA			

STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
**BREATH TESTING INSTRUMENTATION SERVICE REPORT**

1. Department: <b>Stratford Borough Police Department 315 Union Avenue Stratford NJ, 08084</b>		2. Contact: <b>Chief Morello</b>	4. Date: <b>04/10/2013</b>
		3. Phone Number: <b>856-783-8616</b>	5. County: <b>Camden</b>
6. Alcotest Instrument Serial Number: <p style="text-align: center;"><b>N/A</b></p>	7. Simulator Component Serial Number: <p style="text-align: center;"><b>DDUK S3-0133</b></p>	8. Temperature Probe Component Serial Number: <p style="text-align: center;"><b>N/A</b></p>	

9. Reason for Service:  
**The simulator was returned from outside evaluation and placed back in service.**

10. Comments:  
**The simulator was found to be in proper working order.**

11. The above Instrument/Component has been found to be in satisfactory working condition; no further action required.
12. The above Instrument/Component is placed out of service pending further evaluation.
13. The above Instrument/Component is placed back in service.

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**Tpr. II Michael P. Gibson #6353**  
Name & Badge Number (Print)

*Tpr. II Michael P. Gibson #6353* 4/10/2013  
Signature Date

# Packing Slip

Customer no    Order No    Order date  
 150053903    10620010    04/22/2013

Packing slip no.    Ship date  
 80768292    04/22/2013

Please reference on inquiries

ship to

150053903  
 STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

bill to

Your Purchase Order Number

04/22/2013  
 04222013  
 Any questions? Please contact:  
 BRENDA BROTMAN

Customer  
 STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

Your sales person

Don Pouliot  
 Phone: 973-398-3228

Delivery terms

FA  
 FREIGHT ALLOWED

Page 1 / 2

Item#	sh. Quant.	Part no. Description			
		Ship via: Fed Ex Ground			
		NOTE: All claims for shortages/defects must be reported within 10 Business days after receipt of order. All returns must have our RMA# clearly marked on the box. Please call Customer Service at 866-385-5900.			
0010	20 EA	6805700 MOUTHPIECE, ALCO 7110/7410/9510 PKG25 Ordered / Back ordered : 20 / 0 EA			
0020	25 EA	4407061 CERT SOLUTION, .10% NEW JERSEY CERTIFIED Ordered / Back ordered : 25 / 0 EA			

**Draeger Safety Diagnostics Inc.**  
 Accounting Address:  
 101 Technology Drive  
 Pittsburgh, PA 15275  
 Tel: (412) 788-5537  
 Fax: (412) 788-5598

**Remit Wire Transfers To:**  
 Citizens Bank  
 Acct. # 6209426615  
 Acct. Name: Draeger Safety Diagnostics Inc.  
 Translt Number: 036076150  
 Federal ID Number: 84-1600159

**REMIT TO:**  
 Draeger Safety Diagnostics Inc.  
 P.O. Box 200337  
 Pittsburgh, PA 15251-0337



# Packing Slip

Customer no    Order No    Order date  
150053903    10620010    04/22/2013

Packing slip no.    Ship date  
80768292    04/22/2013

Please reference on inquiries

Page    2 / 2

Item#	sh. Quant.	Part no. Description			
0030	1 EA	FREIGHT Freight Charges Ordered / Back ordered : 1 / 0 EA			

# Packing Slip

Customer no    Order No    Order date  
 150053903    10566164    08/03/2012

Packing slip no.    Ship date  
 80706759    08/03/2012

Please reference on inquiries

ship to

150053903  
 STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

bill to

Your Purchase Order Number

08/03/2012  
 710: ARNK-0039  
 Any questions? Please contact:  
 MARA HERRERA

Customer

STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

Your sales person

Don Pouliot  
 Phone: 973-398-3228

Delivery terms

PPA  
 PREPAY AND ADD

Page 1 / 2

Number of packages: 1

Item#	sh. Quant.	Part no. Description
		Waybill number: 1001891730480000808400539788182026 Ship via: Fed Ex P1
		NOTE: All claims for shortages/defects must be reported within 10 Business days after receipt of order. All returns must have our RMA# clearly marked on the box. Please call Customer Service at 866-385-5900.
		7110: ARNK-0039
0010	1 EA	MPCAL71 CALIBRATION CHARGE - 7110/9510 Ordered / Back ordered : 1 / 0 EA

**Draeger Safety Diagnostics Inc.**  
 Accounting Address:  
 101 Technology Drive  
 Pittsburgh, PA 15275  
 Tel: (412) 788-5537  
 Fax: (412) 788-5598

**Remit Wire Transfers To:**  
 Citizens Bank  
 Acct. # 8209426615  
 Accl. Name: Draeger Safety Diagnostics Inc.  
 Translt Number: 036076150  
 Federal ID Number: 84-1600159

**REMIT TO:**  
 Draeger Safety Diagnostics Inc.  
 P.O. Box 200337  
 Pittsburgh, PA 15251-0337

# Packing Slip

Customer no:    Order No    Order date  
150053903    10566164    08/03/2012

**Packing slip no.**    **Ship date**  
80706759    08/03/2012

Please reference on inquiries

Page    2 / 2

Item#	sh. Quant	Part no. Description			
0020	0.5 H	MPLABOR LABOR CHARGE Ordered / Back ordered : 0.5 / 0.0 H			

STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
**BREATH TESTING INSTRUMENTATION SERVICE REPORT**

<b>1. Department:</b> Stratford Borough Police Department 315 Union Avenue Stratford NJ, 08084		<b>2. Contact:</b> Chief Morello  <b>3. Phone Number:</b> 856-783-8616		<b>4. Date:</b> 8-7-2012  <b>5. County:</b> Camden	
<b>6. Alcotest Instrument Serial Number</b> ARNK-0039		<b>7. Simulator Component Serial Number</b> N/A		<b>8. Temperature Probe Component Serial Number</b> N/A	

**9. Reason for Service**  
 Alcotest instrument returned from outside evaluation and placed back in service.

**10. Comments**  
 Return and Repair Form from Draeger indicates that the instrument was recalibrated.  
  
 Alcotest instrument was recalibrated and found to be in proper working order.

11. The above Instrument/Component has been found to be in satisfactory working condition, no further action required.
12. The above Instrument/Component is placed out of service pending further evaluation.
13. The above Instrument/Component is placed back in service.

"I have been certified by the Attorney General as a Breath Test Coordinator/Instructor pursuant to N.J.A.C. 13:51, c.f. seq. In my official capacity as a Breath Test Coordinator/Instructor I perform inspections of evidential breath test devices and related components of evidential breath test systems. I have inspected the evidential breath test device listed on this report in my official capacity. The results of my inspection are recorded on this form. I certify that the forgoing statements made by me are true and accurate to the best of my knowledge. I am aware that if any of the forgoing statements made by me are willingly false, I am subject to punishment."

**Tpr. II Michael P. Gibson #6353**  
 Name & Badge Number (Print)

*Tpr II Michael P. Gibson #6353* 8/7/12  
 Signature Date

# RETURN AND REPAIR FORM



## Customer Information

B: \_\_\_\_\_

S: \_\_\_\_\_

Company Name: Stratford Borough P.D., Stratford, NJ

Date Received: 08/03/12

Date given to service: 08/03/12

Carrier:  FedEx  UPS  USPS Shipping Method:  GRD  3DAY  2DAY  
 NDA-PRI  NDA-STD

Product:  6510  6810  
 7110  8610  
 7510  DT5000  
 7410 Upper-half  9510  
 7410 Whole

Serial Number: AR NK-0039

Printer Serial#: AR

Sim Serial#: DD

Probe Serial#: DD

Warranty Expires: \_\_\_\_\_

Description:  A  B  Plus  Demo  Screener  Trade In

## Accessories

110V A/C Adapter  Regulator  Printer Ribbon  Printer Paper  
 Mouthpieces  9510 Stylus  9510 Top Cover  Carrying Case  
 Dry Gas  Other (please specify) \_\_\_\_\_

## Repair Information

Test#: \_\_\_\_\_

Part Number	Description	Qty	Total Cost
MP Cal 71	Calibration	1	NC/W
MP Labor	Labor	5	NC/W

Repair Notes: Unit need recalibration, recalibrated unit.

CAL W/QC AND OPS CHECK

Service Technician JS

Date: 08-03-12

STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
**BREATH TESTING INSTRUMENTATION SERVICE REPORT**

1. Department: <b>Stratford Borough Police Department 315 Union Avenue Stratford NJ, 08084</b>	2. Contact: <b>Chief Morcello</b>	4. Date: <b>8-2-2012</b>
	3. Phone Number: <b>856-783-8616</b>	5. County: <b>Camden</b>
6. Alcotest Instrument Serial Number: <b>ARNK-0039</b>	7. Simulator Component Serial Number: <b>N/A</b>	8. Temperature Probe Component Serial Number: <b>N/A</b>

9. Reason for Service:  
**Complaint received regarding low IR and EC results.**

10. Comments:  
**While attempting to calibrate the instrument, the instrument displayed "Ctrl Gas Supply" on the LED screen and would not allow a calibration to be completed.**

11. The above Instrument/Component has been found to be in satisfactory working condition; no further action required
12. The above Instrument/Component is placed out of service pending further evaluation
13. The above Instrument/Component is placed back in service.

"I have been certified by the Attorney General as a Breath Test Coordinator/Instructor pursuant to N.J.A.C. 13:51, et. seq. In my official capacity as a Breath Test Coordinator/Instructor I perform inspections of evidential breath test devices and related components of evidential breath test systems. I have inspected the evidential breath test device listed on this form in my official capacity. The results of my inspection are recorded on this form. I certify that the foregoing statements made by me are true and accurate to the best of my knowledge. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment."

**Tpr. II Michael P. Gibson #6353**  
Name & Badge Number (Print)

*Michael P. Gibson #6353* 8/2/12  
Signature Date

# Packing Slip

Customer no    Order No    Order date  
 150053903    10353635    06/05/2012

Packing slip no.    Ship date  
 80692066    06/05/2012

Please reference on inquiries

Ship to  
 150053903  
 STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

bill to

Your Purchase Order Number  
 06/05/2012  
 RECERT/RECAL  
 Any questions? Please contact:  
 AMANDA DILLEY

Customer  
 STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

Your sales person  
 Don Pouliot  
 Phone: 973-398-3228

Delivery terms  
 FA  
 FREIGHT ALLOWED

Item#	sh. Quant.	Part no Description
		Ship via: Fed Ex Ground
		NOTE: All claims for shortages/defects must be reported within 10 Business days after receipt of order. All returns must have our RMA# clearly marked on the box. Please call Customer Service at 866-385-5900.
		SIM: DDUK3-0133 PROBE: DDLLP1-0015
0010	1 EA	MFCERT CERTIFICATION CHARGE SIMULATOR Ordered / Back ordered : 1 / 0 EA

**Draeger Safety Diagnostics Inc.**  
 Accounting Address:  
 101 Technology Drive  
 Pittsburgh, PA 15275  
 Tel: (412) 788-5537  
 Fax: (412) 788-5598

Remit Wire Transfers To:  
 Citizens Bank  
 Acct # 6209426615  
 Acct. Name: Draeger Safety Diagnostics Inc.  
 Transit Number: 036076150  
 Federal ID Number: 84-1600159

**REMIT TO:**  
 Draeger Safety Diagnostics Inc  
 P.O. Box 280337  
 Pittsburgh, PA 15251-0337

# Packing Slip

Customer no    Order No    Order date  
150053903    10553635    06/05/2012

Packing slip no.    Ship date  
80692066    06/05/2012

Please reference on inquiries

Page    2 / 2

Item#	sh. Quant	Part no. Description			
0020	1 EA	MPCALTP CAL CHARGE, SIM PROBE Ordered / Back ordered : 1 / 0 EA PROBE DDUNP2-316 REPLACED WITH DDLLP1-0015			
0040	1 EA	FREIGHT Freight Charges Ordered / Back ordered : 1 / 0 EA			



STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
**BREATH TESTING INSTRUMENTATION SERVICE REPORT**

1. Department: <b>Stratford PD</b> <b>315 Union Ave</b> <b>Stratford, NJ 08084</b>	2. Contact: <b>Chief Morello</b> 3. Phone Number: <b>856-783-8616</b>	4. Date: <b>1-19-2011</b> 5. County: <b>Camden</b>
6. Alcotest Instrument Serial Number: <p style="text-align: center;"><b>ARNK-0039</b></p>	7. Simulator Component Serial Number: <p style="text-align: center;"><b>N/A</b></p>	8. Temperature Probe Component Serial Number: <p style="text-align: center;"><b>N/A</b></p>

9. Reason for Service:  
**The Alcotest 7110 came back from outside evaluation from Draeger and is returned to service.**

10. Comments:  
**See attached packing slip for details of Draeger's work conducted on the instrument.**

11. The above Instrument/Component has been found to be in satisfactory working condition; no further action required.
12. The above Instrument/Component is placed out of service pending further evaluation.
13. The above Instrument/Component is placed back in service.

"I have been certified by the Attorney General as a Breath Test Coordinator/Instructor pursuant to N.J.A.C. 13:51, et. seq. In my official capacity as a Breath Test Coordinator/Instructor I perform inspections of evidential breath test devices and related components of evidential breath test systems. I have inspected the evidential breath test device listed on this report in my official capacity. The results of my inspection are recorded on this form. I certify that the forgoing statements made by me are true and accurate to the best of my knowledge. I am aware that if any of the forgoing statements made by me are willingly false, I am subject to punishment."

**Tpr. I F. Sullivan #5103**  
 Name & Badge Number (Print)

*Tpr I F Sullivan # 5103 1-19-11*  
 Signature Date

# Packing Slip

Customer no    Order No    Order date  
 150053903    10451542    01/12/2011

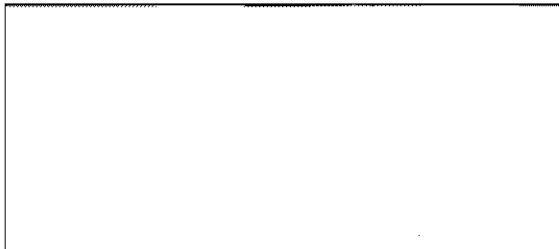
Packing slip no.    Ship date  
 80571768    01/12/2011

Please reference on inquiries

ship to

150053903  
 STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

bill to



Your Purchase Order Number

7110 WARRANTY: ARNK-0039  
 Any questions? Please contact:  
 MARA HERRERA

Customer

STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

Your sales person

Don Pouliot  
 Phone: 973-398-3228

Delivery terms

FA  
 FREIGHT ALLOWED

Page 1 / 2

Item#	sh. Quant.	Part no. Description			
		Ship via: Fed Ex Saver			
		NOTE: All claims for shortages/defects must be reported within 10 Business days after receipt of order. All returns must have our RMA# clearly marked on the box. Please call Customer Service at 866-385-5900.			
		7110: ARNK-0039			
0010	1 EA	6808455 SENSOR : FUEL CELL Ordered / Back ordered : 0 / 0 EA REPLACED			
0020	1 EA	MPCAL71 CALIBRATION CHARGE - 7110/9510 Ordered / Back ordered : 0 / 0 EA			

**Draeger Safety Diagnostics Inc.**  
 Accounting Address:  
 101 Technology Drive  
 Pittsburgh, PA 15275  
 Tel: (412) 788-5537  
 Fax: (412) 788-5598

**Remit Wire Transfers To:**  
 Citizens Bank  
 Acct. # 6209426615  
 Acct. Name: Draeger Safety Diagnostics Inc.  
 Transit Number: 036076150  
 Federal ID Number: 84-1600159

**REMIT TO:**  
 Draeger Safety Diagnostics Inc.  
 P.O. Box 200337  
 Pittsburgh, PA 15251-0337

# Packing Slip

Customer no    Order No    Order date  
150053903    10451542    01/12/2011

Packing slip no.    Ship date  
80571768    02/12/2011

Please reference on inquiries

Page    2 / 2

Item#	sh. Quant.	Part no. Description			
0030	0.5 H	MPLABOR LABOR CHARGE Ordered / Back ordered : 0.0 / 0.0 H			

STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
**BREATH TESTING INSTRUMENTATION SERVICE REPORT**

1. Department: <b>Stratford Twp. PD 315 Union Ave Stratford, NJ 08084</b>	2. Contact: <b>Chief Morello</b> 3. Phone Number: <b>856-783-8616</b>	4. Date: <b>1-5-2011</b> 5. County: <b>Camden</b>
6. Alcotest Instrument Serial Number: <p style="text-align: center;"><b>ARNK-0039</b></p>	7. Simulator Component Serial Number: <p style="text-align: center;"><b>n/a</b></p>	8. Temperature Probe Component Serial Number: <p style="text-align: center;"><b>n/a</b></p>

9. Reason for Service:  
**Fuel cell would not recovery after control tests.**

10. Comments:  
**Instrument was sent back to Draeger for further evaluation.**

11. The above Instrument/Component has been found to be in satisfactory working condition; no further action required.
12. The above Instrument/Component is placed out of service pending further evaluation.
13. The above Instrument/Component is placed back in service.

"I have been certified by the Attorney General as a Breath Test Coordinator/Instructor pursuant to N.J.A.C. 13:51, et. seq. In my official capacity as a Breath Test Coordinator/Instructor I perform inspections of evidential breath test devices and related components of evidential breath test systems. I have inspected the evidential breath test device listed on this report in my official capacity. The results of my inspection are recorded on this form. I certify that the forgoing statements made by me are true and accurate to the best of my knowledge. I am aware that if any of the forgoing statements made by me are willingly false, I am subject to punishment."

<b>Tpr. I F. Sullivan #5103</b> <hr/> <small>Name &amp; Badge Number (Print)</small>	 <hr/> <small>Signature</small>	<b>1-5-2011</b> <hr/> <small>Date</small>
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STATE OF NEW JERSEY  
DEPARTMENT OF LAW AND PUBLIC SAFETY  
DIVISION OF STATE POLICE  
**BREATH TESTING INSTRUMENTATION SERVICE REPORT**

1. Department: <b>Stratford PD</b> <b>315 Union Ave</b> <b>Stratford, NJ 08084</b>	2. Contact: <b>Chief Morello</b> 3. Phone Number: <b>856-783-8616</b>	4. Date: <b>1-19-2011</b> 5. County: <b>Camden</b>
6. Alcotest Instrument Serial Number: <p style="text-align: center;"><b>ARNK-0039</b></p>	7. Simulator Component Serial Number: <p style="text-align: center;"><b>N/A</b></p>	8. Temperature Probe Component Serial Number: <p style="text-align: center;"><b>N/A</b></p>

9. Reason for Service:  
**The Alcotest 7110 came back from outside evaluation from Draeger and is returned to service.**

10. Comments:  
**See attached packing slip for details of Draeger's work conducted on the instrument.**

11. The above Instrument/Component has been found to be in satisfactory working condition; no further action required.
12. The above Instrument/Component is placed out of service pending further evaluation.
13. The above Instrument/Component is placed back in service.

"I have been certified by the Attorney General as a Breath Test Coordinator/Instructor pursuant to N.J.A.C. 13:51, et. seq. In my official capacity as a Breath Test Coordinator/Instructor I perform inspections of evidential breath test devices and related components of evidential breath test systems. I have inspected the evidential breath test device listed on this report in my official capacity. The results of my inspection are recorded on this form. I certify that the forgoing statements made by me are true and accurate to the best of my knowledge. I am aware that if any of the forgoing statements made by me are willingly false, I am subject to punishment."

**Tpr. I F. Sullivan #5103**  
 Name & Badge Number (Print)

*Tpr I F Sullivan # 5103 1-19-11*  
 Signature Date

# Packing Slip

Customer no    Order No    Order date  
 150053903    10776459    05/06/2015

Packing slip no.    Ship date  
 80945255    05/06/2015

Please reference on inquiries

Ship to

150053903  
 STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

Payer

Your Purchase Order Number

05/06/2015  
 SGT. STEPHEN MCBRIDE  
 Any questions? Please contact:  
 ROSEMARIE HUGHES

Customer

STRATFORD POLICE DEPARTMENT  
 CAMDEN COUNTY  
 315 UNION AVENUE  
 STRATFORD, NJ 08084  
 USA

Your sales person

LINDA SALO  
 Phone: 866-385-5900  
 Fax: 972-929-1260

Delivery terms

FA  
 - FREIGHT ALLOWED.

Item#	sh. Quant.	Part no. Description			
		Ship via: Fed Ex Ground			
		NOTE: All claims for shortages/defects must be reported within 10 Business days after receipt of order. All returns must have our RMA# clearly marked on the box. Please call Customer Service at 866-385-5900.			
		SIM: DDUKS3-0133, PROBE DDLLP1-0015 REC'D 4/24/15			
0010	1 EA	MPCERT CERTIFICATION CHARGE SIMULATOR Ordered / Back ordered : 1 / 0 EA			
0020	1 EA	MPCALTP CAL CHARGE, SIM PROBE Ordered / Back ordered : 1 / 0 EA			

**Draeger Safety Diagnostics Inc.**  
 Accounting Address:  
 101 Technology Drive  
 Pittsburgh, PA 15275  
 Tel: (412) 788-5537  
 Fax: (412) 788-5598

**Remit Wire Transfers To:**  
 Citizens Bank  
 Acct. # 6209426615  
 Acct. Name: Draeger Safety Diagnostics Inc.  
 Transit Number: 036076150  
 Federal ID Number: 84-1600159

**REMIT TO:**  
 Draeger Safety Diagnostics Inc.  
 P.O. Box 536410  
 Pittsburgh, PA 15253-5906

# Packing Slip

Customer no    Order No    Order date  
150053903    10776459    05/06/2015

Packing slip no.    Ship date  
80945255    05/06/2015

Please reference on inquiries

Page    2 / 2

Item#	sh. Quant.	Part no. Description			
0030	1 EA	12043 HOSE PUMP-SIM W/SIM-CUVETTE HOSE 2" Ordered / Back ordered : 1 / 0 EA			
0040	1 EA	4540023 GASKET, SIM JAR, 4"ODX.139"WALL, #240 Ordered / Back ordered : 1 / 0 EA			
0050	1 EA	FREIGHT Freight Charges Ordered / Back ordered : 1 / 0 EA			