

EQUIPMENT REPAIR REQUISITION FORM

Please fill out this form if you have equipment to repair. (Not including computers or printers)

.....

Submitted By: _____

Date Submitted: _____

School: _____

Type of Equipment:

Room #: _____

Make/Model: _____

Serial Number: _____

Explain what service is needed on the equipment:

.....

Submit completed form to LMC personnel.