

Clint Independent School District Radio Repair Request & Transfer Form



Requested By:				Date:
Phone Number:				
Unit #	Brand / Model	Serial Number	Person Assigned To:	Area of Service, i.e. Clint, Montana, Horizon
Description of Problems and Symptoms:				
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Offic#	biana / Model	Seliai Nullibei	reison Assigned to.	Area of Service, i.e. Clifft, Moritana, Florizon
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Unit #	Brand / Model	Serial Number	Person Assigned To:	Area of Service, i.e. Clint, Montana, Horizon
Description of Problems and Symptoms:				
Received By:				Date:
Phone Number:			Estimated Date of Co	mpletion:
				F
Signature of Receiver:				