

CHRONIC TACOS

R&M Equipment/Vendor History Form

Company Name: _____

Model No. _____

Brand: _____

Serial No.: _____

Purchased From: _____

Purchase Date: _____

Warranty Period - Parts: _____

Warranty- Labor _____

Primary Service Vendor: _____

Alt. Service Co. _____

Service Date	Equipment Issue	Serviced By:	Cost and Invoice No.	Notes