7 Defect report form

This card must be returned to F care systems within 15 days after occurrance of a problem with the Viridex RF

F care systems NV

Oosterveldlaan 99

B-2610 –WILRIJK-ANTWERP - Belgium

Fax: +32 3 451 51 39

Email: Info@fcaresystems.com

I, undersigned (name and function)..... state that, when using VIRIDEX RF N° : …….. , on date ……. to have experienced the following problem with the VIRIDEX RF:

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NAME and SIGNATURE STAMP

Telephone number: .....

Email: .....