



<b>6</b>	<b>Item</b>	Description	Serial No.	<input type="text"/>	<input type="checkbox"/>	Removed Component Condition (X)
	Prefix & Ident No.			If Item Replaced Mark Box with (X)		
	<b>Replacement</b>	Description	Serial No.	<input type="text"/>		How Malfunctioned <input type="text"/>
	Prefix & Ident No.			<b>If Ident Number Different from that</b> Removed, Mark Box with (X)		REF <input type="text"/>
						DES <input type="text"/>
	Quantity: <input type="text"/>		JCN (G081 USE ONLY)	<input type="text"/>		Action Taken <input type="checkbox"/>

<b>7</b>	<b>Item</b>	Description	Serial No.	<input type="text"/>	<input type="checkbox"/>	Removed Component Condition (X)
	Prefix & Ident No.			If Item Replaced Mark Box with (X)		
	<b>Replacement</b>	Description	Serial No.	<input type="text"/>		How Malfunctioned <input type="text"/>
	Prefix & Ident No.			<b>If Ident Number Different from that</b> Removed, Mark Box with (X)		REF <input type="text"/>
						DES <input type="text"/>
	Quantity: <input type="text"/>		JCN (G081 USE ONLY)	<input type="text"/>		Action Taken <input type="checkbox"/>

<b>8</b>	<b>Item</b>	Description	Serial No.	<input type="text"/>	<input type="checkbox"/>	Removed Component Condition (X)
	Prefix & Ident No.			If Item Replaced Mark Box with (X)		
	<b>Replacement</b>	Description	Serial No.	<input type="text"/>		How Malfunctioned <input type="text"/>
	Prefix & Ident No.			<b>If Ident Number Different from that</b> Removed, Mark Box with (X)		REF <input type="text"/>
						DES <input type="text"/>
	Quantity: <input type="text"/>		JCN (G081 USE ONLY)	<input type="text"/>		Action Taken <input type="checkbox"/>

<b>9</b>	<b>Item</b>	Description	Serial No.	<input type="text"/>	<input type="checkbox"/>	Removed Component Condition (X)
	Prefix & Ident No.			If Item Replaced Mark Box with (X)		
	<b>Replacement</b>	Description	Serial No.	<input type="text"/>		How Malfunctioned <input type="text"/>
	Prefix & Ident No.			<b>If Ident Number Different from that</b> Removed, Mark Box with (X)		REF <input type="text"/>
						DES <input type="text"/>
	Quantity: <input type="text"/>		JCN (G081 USE ONLY)	<input type="text"/>		Action Taken <input type="checkbox"/>

<b>10</b>	<b>Item</b>	Description	Serial No.	<input type="text"/>	<input type="checkbox"/>	Removed Component Condition (X)
	Prefix & Ident No.			If Item Replaced Mark Box with (X)		
	<b>Replacement</b>	Description	Serial No.	<input type="text"/>		How Malfunctioned <input type="text"/>
	Prefix & Ident No.			<b>If Ident Number Different from that</b> Removed, Mark Box with (X)		REF <input type="text"/>
						DES <input type="text"/>
	Quantity: <input type="text"/>		JCN (G081 USE ONLY)	<input type="text"/>		Action Taken <input type="checkbox"/>