

Essential Medical Training, LLC

"Providing Quality, Professional Training"

AED Expiration Tracking Form

Customer Information

Business Name: _____

Street Address: _____

City _____ State _____ Zip Code _____

Mailing Address: *(if different)* _____

City _____ State _____ Zip Code _____

Phone: _____ Email: _____

Contact Person: _____ Position: _____

Phone: _____ Email: _____

AED Information

AED Type: _____ Serial #: _____

Case Type: _____ **Battery:** Lot: _____ **Expiration:** _____

Adult Pads: Qty: _____ Lot: _____ **Expiration:** _____

Child Pads: Qty: _____ Lot: _____ **Expiration:** _____

AED Location: _____

Comments: _____

DISCLAIMER

The tracking of expiration accessories is a complimentary benefit associated with all AED's purchased from Essential Medical Training, LLC. The customer is ultimately responsible for the maintenance and liability of all equipment and accessories purchased. Essential Medical Training, LLC will keep a record of expirations and attempt to contact the customer when the items are due to be replaced. Essential Medical Training, LLC will use one or more of the contacts listed above to notify the customer when items are due to be replaced. It is the customers responsibility to notify Essential Medical Training, LLC if any of the contact information changes. This complimentary benefit may be discontinued at any time without notice. The customer is responsible for the cost of replacing expired items.

Representative Signature _____ Date: _____

Print Name: _____ Position: _____

www.EssentialMedicalTraining.com

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