



SportSystems

Electronic Instrumentation for Motorsport

AiM SportSystems
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AiM Service Sheet

Date: _____ Name: _____

Address: _____

Mobile Ph: _____

Email: _____

AiM Product (Eg MyChron5): _____ Serial Number: _____

Purchase Date: _____ Where Purchased? _____

Brief Description of Service or Repair required:

Quote for repair required? Yes or No (Please circle)

OFFICE USE ONLY				
Date Repair Received:	Battery included Y / N		Date Repair Completed:	
NOTES:	Update Firmware	Load GPS Tracks	Check operation	Amount \$
	Ref #		Date shipped	