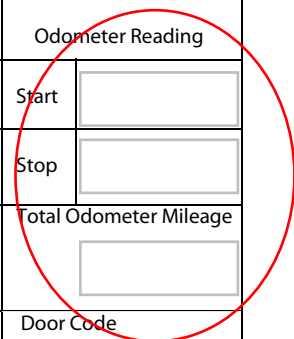


				ACTIVITY REPORT	
Customer/Agency		Point of Contact	Problem Description		
Location		POC Phone			
		ITG Call Number	Problem Solution		
City	State	Contract Number			
MFR	Model	Serial Number	Incident Complete	Activity Date	
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Customer Deferred	<input type="text"/>	
Part Number	Description	QTY	Start Task		Odometer Reading
			Stop Task		Start <input type="text"/>
			Total Task Hours		Stop <input type="text"/>
			<b>To Site</b>		Total Odometer Mileage
			Travel Start	-----	<input type="text"/>
			Travel Stop		
			<b>From Site</b>		Door Code
			Travel Start	-----	<input type="text"/>
			Travel Stop		
Verify Serial #	Page Count		<b>ITG Internal Billable:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
FE Signature: _____		Print Last Name	Authorized Customer Signature(Please verify time worked)		Date
			_____		



Add the Pencil Button Here

**Special Instructions:**