

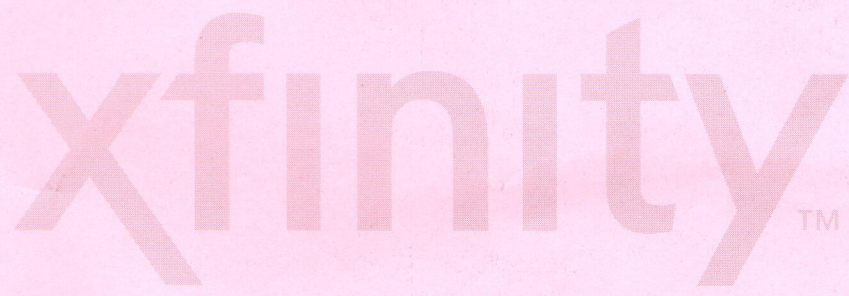
100 Andrew Stump

TECHNICIAN	JOB DESCRIPTION	JOB
9397	WP - 15CL	341740
SALES REP	HOUSE NUMBER	PRINT DATE

SERVICE NAME AND ADDRESS	HOME PHONE	DATE	TIME	UNITS	CATG.	REPRINT
Andrew Stump Home Office 212 Thompson Square North View CA 94043	650.906.4443	3/20/17	2-4	25		
REQUESTOR	WORK PHONE	CUSTOMER NUMBER	CALL FIRST	PRINT ID	ORDER REASONS	
					815T. 1001. 5045. 3391	

BCN G
Mack# 0CO227 FAO 21C

SUNNY SMC
5 STATIC IP



Francis - TECH
916 - 531-9998
Antonio - Supervisor
916 - 216-5979

TECH NUMBER/TECH SIGNATURE: 9397
DATE: 3/20/17

C.O.D.
By signing below, I represent that I am at least 18 years old; I am the owner of, or tenant in, the premises at the above address and that the installation, repair or other work provided has been satisfactorily completed. If this work order relates to the initial installation of services, I acknowledge receipt of Comcast's Welcome Kit which contains the Comcast Subscriber Agreement, the Comcast Cable Subscriber Privacy Notice and other important information about the services. I agree to be bound by the Comcast Subscriber Agreement which constitutes the agreement between Comcast and me for the services. If other non-installation work was provided, I agree to continue to be bound by the current Comcast Subscriber Agreement. I authorize Comcast to obtain a credit report from a consumer credit agency in connection with the provision of the services I am receiving.

X CUSTOMER SIG. PRE-INSTALL DATE X CUSTOMER SIG. POST INSTALL DATE

COMPLETION/RESOLUTION CODE							TOTAL AMOUNT PAID		
COMPLETION							I.R. TECH COMMENTS		
DATE	I.R. TECH #	START	STOP						
CLI	Channel	3	42	77	HSI	TEL	GROUND FIELD		
	Level								