

Sheet1

WO\_NUM,N,5,0 DATE,D L\_NAME,C,20 F\_NAME,C,15 MR,C,3 ADDRESS1,C,30 ADDRESS2,C,30

Sheet1

CITY,C,15 PROV,C,3 POSTAL,C,10 BRAND,C,20 BR\_DESC,C,20 AGE,C,2 MODEL,C,20

Sheet1

SERIAL,C,20 OTHER,C,53 COMPLAINT,M RECEIVED,D ESTIMATED,D PROMISED,D

Sheet1

COMPLETED,D TAKEN\_BY,C,10 EST\_BY,C,10 REP\_BY,C,10 WORK\_DONE,M TAX1,N,12,2

TAX2,N,12,2 TOTAL,N,14,2 SHIP,N,7,2