

WARRANTY RETURN FORM

NAME OF DEALER OR CUSTOMER _____

DATE _____

ADDRESS _____

DATE RECV'D @ SUNWARD _____

ITEM #	1	2	3	4	5	6
DATE OF PURCHASE						
ITEM & FREQUENCY						
SERIAL #						
CUSTOMER'S NAME						
ENTER PROBLEM CODE						
3- BEEPING FUNNY	7- DAMAGED	10- DEAD	14- WATER CORROSION	17- RECASE	18- DRAINER	
NOTES						

DID YOU CHECK THE EQUIPMENT OUT ?

DO NOT WRITE BELOW THIS LINE

CHECK IF RECEIVED						
CARD ON FILE Y/N						
CHECKED BY						
REPAIRED BY						
PROB. FOUND						
REPAIRED CODE						
CHECK IF REPLACED						
ACCESSORIES						
CHARGE						
NOTES						