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**RETURN TO MANUFACTURER FOR REPAIRS FORM**

**Your name/Company name** \_\_\_\_\_

**Shipping Address** \_\_\_\_\_

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**Billing address if different** \_\_\_\_\_

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**Contact Phone #** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Requested time of return** \_\_\_\_\_

**Please describe problem** \_\_\_\_\_

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