

****If paying by check, please make payable to Powell Products, Inc. For credit cards, we accept Visa/MasterCard/Discover Only.****

Name: _____

Address: _____

_____ City: _____ State: _____ Zip _____

Email: _____ Tel: _____

CC#: _____ EXP: _____ 3 Digit Code: _____

Rod Model: _____ Serial Number: _____

Date of Purchase: _____

****If returning more than one rod, additional rod models, serial numbers, and dates of purchase can be listed in the blank area below****

Mailing address:

Powell Product, Inc.
2416 S. 8th St. #104
Rogers, AR 72758