

JOSÉ EBER

WARRANTY RETURN FORM

Please fill out and include this form with the product you are returning to expedite the processing time of your replacement item.

First Name _____ *Last Name* _____

Address _____ *City* _____ *State* _____ *Zip* _____

Phone Number _____ *Email* _____

Brief Explanation for the Return

Where Purchased _____ *Date of Purchase* _____

Also Include:

A copy of the original receipt

A check or money order in the amount of \$19.95 for shipping and handling

Return to:

*TOL Products Customer Service
26570 Agoura Rd, Ste 180
Calabasas, CA 91302*