THE SPEAKER EXCHANGE

Repair Form

NAME: EMAIL:	01 02	F
PHONE #:	03	0
	 04 05	E
ADDRESS:	 05	F
CITY:	 06 07	F
STATE:	08	ę
COUNTRY:		E
ZIPCODE:	09	ļ
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Thank you for the opportunity to serve you. We appreciate your business and your satisfaction is our top priority.

Please follow the below instructions for all repairs:

- 1. Fill out this form clearly and legibly and include it inside the box with your repairs.
- 2. Package your items carefully. Speaker frames and magnets should not touch the edge of the box. We recommend double boxing and adding cushioning (i.e. bubble wrap- please no foam peanuts or shredded paper). Insurance is highly recommended.
- **3.** We will email you with your repair ticket when we receive your repair. A technician will follow up with an estimate a few days later.

Address all repairs to:

The Speaker Exchange, Repairs Dept. 8217 N. Nebraska Ave, Tampa, FL 33604

Please tell us the reason why you are sending your item by writing the appropriate code in the "**Problem Code**" box below and repair instructions

01 FOAM ROT 02 RUBBER SURROUND ROT 03 OPEN COIL

PROBLEM CODES

- 04 DISTORTED
- 05 BLOWN SPEAKER
- 06 BLOWN DIAPHRAGM
- 07 RE-GRILL
- 08 SENT FOR
- EVALUATION
- 09 UNSURE
- 010 DEFECTIVE 011 OTHER (PLEASE
 - EXPLAIN)

REPAIR INSTRUCTIONS

- RECONE
- REFOAM
- RE-SURROUNDRE-DIAPHRAGM
- RE-DIAPHRA
 RE-GRILL
- REPAIR
 CROSSOVER
- WARRANTY
 REQUEST
- EVALUATE
- REBUILD
- TWEETER • OTHER
- (PLEASE EXPLAIN)

QUANTITY	BRAND	MODEL	PROBLEM	REPAIR INSTRUCTIONS

□ I have been quoted \$_____ for my repair. □ I have not been quoted for my repair. Payment options:

- □ I will pay by credit card
 - Name on card _____
 - Card Number

Expiration Date _____/____ Security Code _____

□ Please call me for my credit card info.

Please send me a PayPal invoice (1-2 day delay for shipping)