



### Warranty Claim Form

Angler Innovations requires return of product. Ship the damaged product prepaid, along with a check or money order for \$6.95 to cover the return shipping and handling.

Mail To:  
Angler Innovations Warranty Department  
5571 Elizabeth Rose Sq  
Orlando, FL 32810

**Please Print Clearly**

**ALL FIELDS ARE REQUIRED**-MUST BE COMPLETED in order to process your warranty claim.

Customer Name: \_\_\_\_\_

Ship to Address: (No PO Box)

\_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date Purchased: \_\_\_\_\_

Warranty Issue: \_\_\_\_\_

\_\_\_\_\_

Check # or Money Order # \_\_\_\_\_