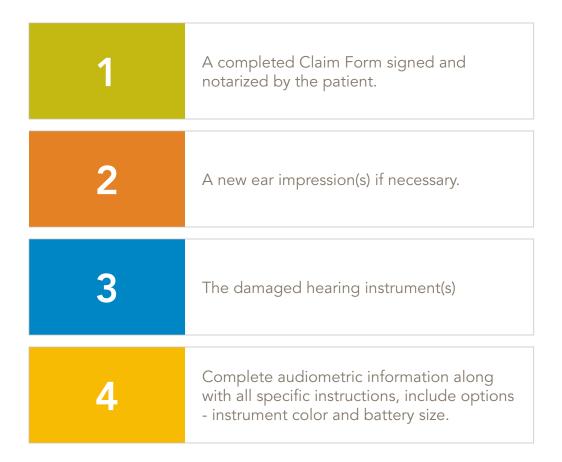
## Instructions for filing a claim for lost or damaged hearing instrument(s)

All claims must be submitted to Worry Free Warranty Services, according to the instructions listed below. Any deviation from these instructions must receive prior approval. Failure to do so may result in denial of claim.



All instrument replacements will be done only with equivalent instrument(s) from the following product lines: Starkey, Audibel, NU-EAR, Omni, Qualitone, Micro-Tech





## Claim Form

For lost or damaged hearing instrument(s)

See reverse side for instructions

Warranty Holder											
Name											
Address											
City	State	ZIP		Phone							
Servicing Dispenser											
Name											
Name											
Address											
City	State	ZIP	Phone								
Signature		Date									
Hearing Instrument Information	1:	25 250	) 50	00 10	000	2000	40	000	8K		
Make	Model(s)		0				1		1		
Make	Model(s)		10								
Serial Number(s)			20			<u> </u>			<u> </u>		
Color	Battery Size		30 40						1		
Color	Dattery Size		50				1		1		
Cause of Loss or Damage			60				$\vdash$		<u> </u>		
			70			<u> </u>	+ †		<u>'</u>		
			80 90						1	-	
SRT: MCL:	UCL:		100			<u> </u>	1		1		
JIVI.	OCL.		110						<u> </u>		
I certify that the claimed loss or damage did not intentionally occur so as to violate the conditions of the warranty, and no attempt to deceive the company has in any manner been made.											
Warranty Holder's Signature	D	ate									
Signed or attested before me on Date	B N	y Iame(s) of Person(	(s)								
Notary's Signature											
State of:	C	County of:									
Title		Seal									
Commission Expiration											