

RETURN CHECKLIST

Order Number: _____

Customer Name: _____

Customer Number_____

Return Type: Repair / Replace Refund

I confirm that:

- The TV has been wrapped securely with protective padding**
- No items are placed in front of the TV screen**
- The box is strong and properly sealed**
- The product is unused (for change of mind returns)**
- All original accessories are included**

Signature: _____

Date: _____