

**PARABELLUM COMBAT SYSTEMS' REPAIR POLICY CARD**

Please fill out and mail this card to: Parabellum Combat Systems, 10539 N. Perry Rd, Stigler, OK 74462

NAME: \_\_\_\_\_ DATE OF PURCHASE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

PHONE: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

MODEL: \_\_\_\_\_ SERIAL NUMBER: \_\_\_\_\_

I have read and understand the Warranty, Return, and Repair Policy, and agree to abide by all conditions therein.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Effective: 01-SEP-08