

Lexmark End User Warranty Claim Form

Section I: End User Information

End User Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Area Code/Phone #: _____ Area Code/Fax #: _____

E-mail: _____

Place of Original Purchase: _____

Date of Original Purchase: _____

If you contacted the Lexmark Technical Support Center for this problem, and a Call Reference Number was issued, then please provide that Reference Number.

Reference Number: _____

Section II: Product Information

Product Part Number: _____

Please describe the Problem you are experiencing:

Section III: Print Sample

Please attach a print sample illustrating the defect you are experiencing and include it with the Product you are returning for warranty, along with proof of purchase, and this End User Warranty Claim Form.

Should you have any questions or concerns, please call toll free: 1-800-438-2468.