

# DX8 Return Form

Please complete this form and include it with your radio.

## Your Information

Name: .....

Address:.....

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.....

.....

Postcode.....

Daytime Phone: .....

Evening Phone: .....

Mobile Phone:.....

Email:.....

If you would prefer to have the radio delivered back to you at a different address from the above, such as a work address, please fill in the section below.

## Return Delivery Address

Address:.....

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Postcode.....