

**Angel Xmas Lights**

**Warranty Form:**

Name \_\_\_\_\_

Address \_\_\_\_\_

Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Phone  
(\_\_\_\_) \_\_\_\_\_

E-Mail \_\_\_\_\_

Product/s  
purchased \_\_\_\_\_

Date of Purchase \_\_\_\_\_ / \_\_\_\_\_ / 20\_\_\_\_\_