

Please complete the following information:



weavix[™] Loss/Destruction Form

Cu	stomer Name	
Pe	rson Submitting Form:	
	ntact information: Email: Phone: Phone:	
or \$4	ease provide details for each missing or destroyed device. If unknown, please specify. For all lost destroyed devices, a one-time fee will be charged to your account at the rate of \$675 per walt a 23 per wrangler. alt Devices to Replace:	nd
		
1.	Serial Number (found on back of device):Cause of Lost/Destroyed (detailed):	-
2.	Serial Number (found on back of device): Cause of Lost/Destroyed (detailed):	
3.	Serial Number (found on back of device):Cause of Lost/Destroyed (detailed):	
4.	Serial Number (found on back of device):Cause of Lost/Destroyed (detailed):	
5.	Serial Number (found on back of device): Cause of Lost/Destroyed (detailed):	-
Wr	rangler Devices to Replace:	
1.	Serial Number (found on back of device): Cause of Lost/Destroyed (detailed):	-
2.	Serial Number (found on back of device): Cause of Lost/Destroyed (detailed):	
	Cause of Lost, Destroyed (detailed).	-
On	ce submitted, a new device(s) will be shipped out and the invoice processed.	
	be Completed by Weavix: placement Number Issued:	