

**FINK'S  LUGGAGE  
& REPAIR COMPANY**

DOWNTOWN  
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**WARRANTY-AIRLINE REPAIR FORM**

Top part to be completed by customer only

**Consumer Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, ZIP:** \_\_\_\_\_

**Telephone (Daytime & Mobile:)** (D): \_\_\_\_\_ (M): \_\_\_\_\_

**Customer Signature:** \_\_\_\_\_

Please read and complete the information below:

**Manufacturer:** \_\_\_\_\_

**Style # & Color:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Date Purchased:** \_\_\_\_\_ **Location (Optional):** \_\_\_\_\_

**Repairs Performed** (Please use separate forms for each article and list each repair.)

**Amount:** \$ \_\_\_\_\_ **Shipping:** \$ \_\_\_\_\_ **Total:** \$ \_\_\_\_\_

*In the event your item is not covered under the manufacturer's warranty, we will contact you with an estimate and payment arrangements.*

**Date:** \_\_\_\_\_ / \_\_\_\_\_ /200\_\_\_\_\_