



BE SURE TO INCLUDE THIS FORM IN THE BOX WHEN MAILING THE BOTTLES BACK TO US

DE SURE IU IN	LUDE INIS FURM IN I	HE BOX WHEN M	AILING	пе вот і	LES BACK	10 03
*Date:						
*Name:						
Last		First				MI
check IF NEW addres						
*Address:						
*Phone:		Voice-Mail:	·			
Email:						
		*require	ed fields m	ust be fille	d out for re	eimbursement
Once receive	will accept ONLY Perfected, Perfect Water & Esser h your paid deposit on	ntials LLC will mai	l you a ch	eck reiml	-	ing)
*Bottle Count:	Number of bottles be	ing returned:	X \$	60.05 =	\$	
*Shipping Costs:	Cost of shipping the e	empty bottles to	us:	=	\$	
		Total Reim	burseme	ent: =	\$.	
		*require	ed fields m	ust be fille	ed out for r	eimbursement
_	CLUDE THIS FORM IN TO MAIL TO:	HE BOX WHEN M :MAIL TO:	AILING 1	T HE BOTT :MAIL TO:	LES BACK	X TO US :MAIL TO:
rom:			7		7	

Perfect Water & Essentials LLC

Attn: PWB Recycle Department 1464 West 40 South Suite 100 Lindon, UT 84042-1629