

Printhead Protection

PRINTHEAD REQUEST



Please provide the following information. Complete and accurate information ensures that your free replacement printhead order is processed correctly.

Zebra Partner (please print)

| | |
|-----------------|------|
| Company: | |
| Address: | |
| | |
| City: | |
| State/Province: | Zip: |
| Country: | |
| Phone: | Fax: |
| Contact Name: | |

End User Shipping Address (please print)

| | |
|-----------------|------|
| Company: | |
| Address: | |
| | |
| City: | |
| State/Province: | Zip: |
| Country: | |
| Phone: | Fax: |
| Contact Name: | |

Printer(s)

Indicate the model name of printer for printhead replacement and its serial number.

| Model | Printhead Part Number | Printer Serial Number |
|-------|-----------------------|------------------------------------|
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| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | Total Number of Printheads: |

Zebra Partner or End User Signature

Date

For Office Use

| |
|--|
| |
|--|

Notes: Customer #21799
NOC, S40100-1040-2100
Route Code FRTIP

Email completed form to printheadprotection@zebra.com or fax to +1 847 465 4207.

Zebra Technologies International, LLC

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