



**P.O. Box 6**  
**Centralia, Missouri 65240**  
**573/682-5514 PHONE**  
**573/682-5044 FAX**  
**www.showmeshortline.com**

**Warranty Claim Form Email to: [warranty@showmeshortline.com](mailto:warranty@showmeshortline.com)**

<b>Date:</b>		<b>Filled out by:</b>		<b>Dealer Account Number:</b>	
<b>Distribution or dealer name:</b>					
<b>Address:</b>		<b>City/Province:</b>		<b>Postal Code:</b>	
<b>Customer name:</b>					
<b>Address:</b>		<b>City/Province:</b>		<b>Postal Code:</b>	
<b>Base unit or attachment that failed</b>					
<b>Model:</b>	<b>Serial No.</b>	<b>Date of purchase/date of failure</b>		<b>acres/hrs operated</b>	
<b>Tractor make &amp; model</b>		<b>Date of repairs:</b>		<b>Attachments added:</b>	
<b>Description of failure / reason for credit (do not say defective)</b>					
<b>Dealer signature:</b>					

Parts replaced				
Quantity	Part No.	Description	Price	Total Price

Warranty Labor	Hours/Description	Rate	Total

<b>Parts Total</b>	
<b>Labor Total</b>	
<b>Tax</b>	
<b>Freight</b>	
<b>Claim Total</b>	

Warranty Claim # \_\_\_\_\_