MONTHLY REMITTANCE STATEMENT - Warranty Premium

Month:	Dealer:
	Disease mail by the 40th by since day of each month

7	71 0	400	, .		<u> </u>	
Please	mail by the	• 10tn	business	aav oi	r eacn	montr

CUSTOMER NAME	NEW RENEWAL	CONTRACT NUMBER	PRODUCT	WARRANTY (Dealer Cost
				(200.0.000
· · · · · ·			Total Warranty	
eAt.	INTEGRATED WARE	RANTY SYSTEMS Inc.	GST/HST	
Integrate	495 Richmond Stre		TOTAL TO IWS	



London, Ontario N6A 5A9 1-800-862-7184 warranty@iwsinc.ca

Total Warranty	
GST/HST	
TOTAL TO IWS	

Please make cheque payable to "INTEGRATED WARRANTY SYSTEMS"

AUTHORIZED SIGNATURE		