

Vehicle information:

Make _____ Model _____
_____ Year _____

Mileage _____

Please check what the primary problem is

Dead or
Dim Flickers Erratic Reads
incorrectly

Please check which function is not working

Speedometer Tachometer Volt
Oil Fuel

Temp Odometer Backlight Other
(explain below)

VIN# _____

**ALSO INCLUDE A COPY OF THE PAYPAL
TRANSACTION WITH**

CLUSTER, if you paid by paypal.....

NAME: _____

ADDRESS: _____

CITY: _____

State: _____

Zip code: _____

Phone #: _____

Email: _____

THANKS FOR THE ORDER.....

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