

JLG Industries, Inc.

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Campaign Complete ALL Sections of this form and mail of fax to the location specified above. Completion Form						
Machine Information						
Make:		Model:	Hour Meter R		er Reading:	
Serial Number or VIN/PIN:						
Campaign Completion Information						
Bulletin Number:	Completion Date:					
Contact Information						
Company Name:						
Street Address:			Address1:			
City:	State/Prov	vince: Zip/Postal Code:		Country:		
Telephone:	Facsimile:			E-Mail Address:		
Contact Name:		Signature:			Date:	
Machine Owner Information (Same as Contact)						
Company Name:						
Street Address:			Address1:			
City:	State/Prov	vince:	Zip/Postal Code:		Country:	
Telephone:	Facsimile:		E-Mail/Website Address:		ebsite Address:	