

GK REEL REPAIR FORM

NAME:

ADDRESS:

PHONE:

EMAIL:

REEL MAKE & MODEL:

PURCHASE DATE(APPROX):

PLEASE TICK BOXES BELOW THAT MATCH ANY CONCERNS YOU HAVE WITH YOUR REEL...

HANDLE	SPOOL	DRAG	BAILWIRE
<input type="checkbox"/> BROKEN/BENT	<input type="checkbox"/> DAMAGED	<input type="checkbox"/> SLIPS	<input type="checkbox"/> BROKEN
<input type="checkbox"/> JAMMED	<input type="checkbox"/> WOBBLY	<input type="checkbox"/> ROUGH	<input type="checkbox"/> BENT
<input type="checkbox"/> MISSING	<input type="checkbox"/> NOT TURNING	<input type="checkbox"/> UPGRADE REQ	<input type="checkbox"/> NOT CLICKING



BODY	GEARS	THUMB BAR	ANTI-REVERSE
<input type="checkbox"/> BROKEN	<input type="checkbox"/> ROUGH	<input type="checkbox"/> DAMAGED	<input type="checkbox"/> SWITCH BROKEN
<input type="checkbox"/> PAINT CHIPPED	<input type="checkbox"/> NOISY	<input type="checkbox"/> JAMMED	<input type="checkbox"/> SLIPS
<input type="checkbox"/> CORROSION	<input type="checkbox"/> JAMMED	<input type="checkbox"/> LOOSE	<input type="checkbox"/> JAMMED

ADDITIONAL COMMENTS AND/OR INSTRUCTIONS:

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