



## LETTER OF INTELLECTUAL PROPERTY DESTRUCTION

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### Instructions

This Letter of Destruction (LOD) form on the following page, when completed, certifies that you have destroyed or never received any copies of the software you purchased from Software Toolbox, Inc. via the Softwaretoolbox.com web site.

Please complete this LOD, and return it to Software Toolbox, Inc within 30 days from the date of purchase. We cannot accept returns after 30 days.

Please print the LOD if you received it electronically, fill it out, and email, fax, or mail it to:

**Software Toolbox, Inc.**  
**Attn: Customer Service - Returns**  
**148A East Charles St**  
**Matthews, NC 28105**

**Fax#: 1-704-849-6388**  
**Email: [order@softwaretoolbox.com](mailto:order@softwaretoolbox.com)**

We must receive the email, faxed, or mailed copy within the 30 day period for your order to be voided and your purchase refunded. Please note that after 30 days from the date of purchase, restocking fee will apply.

**NOTE: This form must be completed and signed by the customer for this document to be honored.**

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Purchase / Online Order Number:  
Software Toolbox Representative Authorizing Return:

Software Toolbox RMA #

This AGREEMENT (the "Agreement") is made and entered into by and between Software Toolbox, Inc., a North Carolina Corporation (hereinafter "Software Toolbox") and

(hereinafter "Customer").

The Customer agrees to take the necessary measures to delete and destroy the intellectual property described as:

Product Part # and Name:

Serial Number if Applicable:

Purchased on Software Toolbox Sales Order Number: \_\_\_\_\_ Order Date:

Software Toolbox shall refund the purchase price of the product less any shipping charges if applicable to the Customer and report the product as "destroyed" to the software publisher once this letter has been executed by the Customer and received by Software Toolbox, Inc. Please note that after 30 days from the date of purchase, restocking fee will apply.

Please complete the following information:

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Email Address: \_\_\_\_\_

Reason for Return: \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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