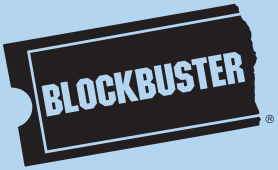
# Coupon Request Form Select Franchise Stores
# "The End of Late Fees"




Date _____

Name _____

Phone Number _____

Address _____

Store Number/Location _____

Reason for Request _____

Date of Transaction _____

Number of Rental Items for Which Extended Viewing Fees Were Paid _____

Signature _____

**Send to: Blockbuster Inc. 1201 Elm Street, Dallas, TX 75270 Attn: Steve Krumholz**

Please allow a minimum of four (4) weeks for processing.

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