



Please complete this form and email to: [DMEUS-insidesales@dme.net](mailto:DMEUS-insidesales@dme.net)

CONTROLLER BUY-BACK PROGRAM	
FIRST NAME:	LAST NAME:
COMPANY:	EMAIL:
PHONE #:	QTY OF CARDS EXCHANGING

**US Customers** please send buy-back cards/modules to:  
DME Buy-Back Program • 29111 Stephenson Highway • Madison Heights, MI 48071  
**Canadian Customers** please send buy-back cards/modules to:  
DME Buy-Back Program • 5345 Outer Drive Unit 3, Oldcastle, ON N9G 0C4

**Please print and include this form with your cards/modules**