ORDER FORM

: IMPORTANT :
Do Not Discard

USE THIS ORDER FORM TO OBTAIN SERVICE PARTS AFTER EXPIRATION OF WARRANTY.

HOW TO ORDER:

1. COPY THE MODEL NUMBER AND SERIAL NUMBER FROM THE IDENTIFICATION PLATE LOCATED ON REAR PANEL OF LOWER CABINET.

2. LIST SERVICE PARTS NEEDED. REFER TO SERVICE PARTS LIST FOR PRICE AND PROPER IDENTIFICATION OF SERVICE PART.

3. FILL THE RETURN ADDRESS SECTION AT LOWER RIGHT HAND CORNER.

4. DETACH BOTTOM HALF OF THIS ORDER FORM AND PLACE INSIDE THE PRE-ADDRESSSED ENVELOPE ALONG WITH CHECK OR MONEY ORDER. PAYABLE TO "BRIARWOOD".

<table>
<thead>
<tr>
<th>MODEL NO.</th>
<th>HOME PINBALL</th>
<th>SERIAL NO.</th>
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<tbody>
<tr>
<td>PART NO.</td>
<td>PART DESCRIPTION</td>
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RETURN ADDRESS:

Print Name____________________
Address_______________________
City__________________________
State_______________ Zip Code____

SUB TOTAL

Plus $1.25 to cover handling expenses $1.25

TOTAL

ENCLOSED IS MY CHECK □ MONEY ORDER □ FOR $________

Order Form – 55-900226-000
IMPORTANT! RECORD OF PURCHASE

MODEL NO. __________________ SERIAL NO. __________________
PINBALL NAME: __________________
OWNERS NAME: __________________
OWNERS ADDRESS: __________________
(STREET OR BOX NO.)
CITY __________________ STATE / ZIP CODE __________________
TELEPHONE NO. __________________
AREA CODE __________________ NUMBERS __________________

DATE OF PURCHASE: __________________
GAME PURCHASED FROM: (NAME) __________________
(ADDRESS) __________________

FOLD ALONG DOTTED LINE

The 10 Questions Listed Below Are Voluntary


2. What were some of the reasons for selecting the product you acquired? (Check all that apply.)

3. In what part of your home have you placed your product? 1. Basement Recreation Room/TV Room/Den 2. Recreation Room/TV Room/Den NOT located in a basement 3. Other (Specify) ____________________ (11)

4. Including yourself, how many people reside in your household? ____________________ people ____________________ (12)


6. What is age of head of household? 1. Under 25 2. 25-34 3. 35-44 4. 45-54 5. 55-64 6. 65 and over ____________________ (14)


8. If this household is headed by a married couple, does wife work? 1. Full time 2. Part time 3. No 4. Not Married ____________________ (16)

9. Did you experience any problems with delivery, installation or performance of your new Briarwood product? 1. No 2. Yes (Specify) ____________________ (17)

10. Aside from your new home recreation product, do you own any of these other products? (Check all that apply)

55-900227-000