

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

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

Check what type of battery you are dropping off.

<input type="checkbox"/> Alkaline	<input type="checkbox"/> Manganese
<input type="checkbox"/> Lead-Acid	<input type="checkbox"/> Mercury
<input type="checkbox"/> Lithium	<input type="checkbox"/> Nickle Metal Hydride
<input type="checkbox"/> Lithium Ion	<input type="checkbox"/> Nickel-Cadmium
<input type="checkbox"/> Lithium Manganese Dioxide	<input type="checkbox"/> Zinc-Carbon
<input type="checkbox"/> Lithium Polymer	<input type="checkbox"/> Other:

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