

Please print this Return Authorization Form and fill it out completely. Please enclose this along with the items that you are returning in a well-packaged box so that the items are not damaged in the return process. Please be sure to insure any package that is of significant value.

Date Returned: Month _____ Date _____ Year _____

Customer Information:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact: _____ Phone #: _____

Order #: _____ Date of Order: _____

Reason for return:

Ordered Incorrect Item, Ordered Incorrect Quantity, Defective, Not What Expected

Other (please explain): _____

Please list the Items being returned:

Quantity	Stock #	Description

Please check one of the following:

Please issue credit for returned items, Please issue refund for returned items.

Please place an order for the following products:

Quantity	Stock #	Description