

**Return Authority**

**Invoice Number:**

**Date:**

**Received from:** \_\_\_\_\_

Model No	Reason for Return	QTY	W/house recorded

Returns will incur a 20% restocking / handling fee on any purchases & applicable freight charge.

**Please Arrange**

Model No	Memo/Description	QTY	W/house recorded

- Replacement Needed
- Exchange to other items
- Return only

Remarks:

Requested by: \_\_\_\_\_

Journal #:

Client sign & \_\_\_\_\_

Recorded by:

Date: \_\_\_\_\_

Date: