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**Return Authorization Form**

Please fill out this form completely!

<b>Sold To:</b>	
Name:	
Address:	
City:	
State:	Zip:
Country:	
Phone:	Fax:
Email:	

Order ID: \_\_\_\_\_

Copy Of Invoice/ Copy of the Received Email Confirmation of My Order?  Yes  No

Quantity	Price	Description	Reason for Return

<b>Explain your request ie: what items you want exchanged</b>

Terms & Conditions:  
 Refunds are only made for the total price of the product. We do not refund the return postage.  
 Those items that are returned after 7 days of delivery, a 15% restocking fee will be applied.  
 Please contact our Customer Service Department vis EMAIL for the Return Authorization Number.

<b>For Official Use Only:</b>	
Received By: _____	Comments:
Items Condition: _____	
Re-Sellable?: <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Material Received:
Date Replacement issued: _____	
Date Refund Issued: _____	

All returns MUST be accompanied by this form.