

RETURN AUTHORIZATION

COMBOTRONICS, INC. – 2800 LOCK & DAM ROAD – INOLA – OKLAHOMA – 74036
PHONE: (918) 543 - 3300 OR (800) 331 - 5941 FAX: (918) 543 - 3310

Return Authorization Number:	Return Date:
Customer PO#:	
Ordered By:	

Company:	Phone #:	Fax #:
Address:		
City:	State:	Zip:

INSURE your item(s) and PACKAGE THEM CORRECTLY or they will be refused. Combotronics, Inc., accepts no responsibility for uninsured items.

Authorization is hereby granted to return material of the following description against the above referenced purchase order, on or before_____. The return material authorization number shown above must appear on the outside of the shipment. Copy of this authorization is to accompany the shipment.

Description of Material	Reason for Return	P/N	QTY	C.I. SO#

Return material must be made by prepaid carrier regardless of the reason for return. Shipping costs for ground transportation are refundable if the return is due to our error.

1. Unless the material returned is as described above and received **by the authorized date**, all invoices outstanding against the material must be paid in full – immediately.
2. All returns are subject to inspection to determine credit level – if any.
3. There is a minimum restocking charge of 50%.

Authorized by: _____
Dept. _____
Date: ___/___/___