



RETURN AUTHORIZATION

RTG Number (PSTCC number) _____

Reason returned (refer to # below):

RMA Number (vendor number) _____

#1 - DAMAGE

Vendor Name _____

#2 - INCORRECT ITEM

Address _____

#3 - PREVIEW COMPLETE

#4 - REPAIR

#5 - DID NOT ORDER

P.O. Number _____

#6 - OTHER

Item(s) returned:

P.O. Item #	Quantity	Description/Part #	Reason Returned (Cite #)*	Cost

*For "Other," list reason each item is being returned:

Item(s) will be Replaced Repaired Canceled Other _____

Released to Shipping/Receiving:

Received by Shipping/Receiving:

Name Date

Name Date

TO BE COMPLETED BY SHIPPING AND RECEIVING

Verify items returned to vendor:

Name (S/R) Date Method of Return Weight

MERCHANDISE PICKED UP BY:

Name Date