

## **RETURN GOODS AUTHORIZATION REQUEST**

Date:	Account #:
Account Name:	Inspection Date:
Address:	(If Required)
City: Zip Code:	hash to (222) C22 1125
Tel: Fax:	Item(s) must be returned within 45 days of RGA issuance.

## **Inspection Report**

Qty	Part #	P.O. #	Invoice #	Reason for Return

Comments: \_\_\_\_\_

## THIS IS NOT AN AUTHORIZATION TO RETURN MERCHANDISE.

Please do <u>not</u> return products until Patriot Lighting has generated a factory issued RGA. Unauthorized returns are subject to refusal by our Receiving Department and/or an administrative fee per occurrence. If the original invoice # is not provided, credit for returned items will be issued at the lowest purchased price made within the last calendar year. **Restocking charges may apply.** 

To Be Completed by Patriot Lighting.							
Approved:	🗆 Yes 🗖 No		Restocking Fee: 🗆 Yes 🗆 No	If Yes:%			
RGA Freight to l	oe paid by:		Authorized Signature:				
Comments:							