D&S VENDING MERCHANDISE RETURN FORM

IF YOU HAVE ANY QUESTIONS ABOUT THE RETURN PROCESS PLEASE CONTACT PATRICK LEARY

patrick@dsvendinginc.com

- * RETURNED PARTS ARE SUBJECT TO A 15% RESTOCKING FEE *
 - 1. CONTACT PATRICK FOR AN RMA#
 - 2. REPACK THE ITEMS IN THIS OR ANY STRONG BOX
- 3. PLEASE COMPLETE THIS FORM & INCLUDE IT WITH YOUR RETURN
- 4. SHIP THE ITEMS BACK TO US. WE RECOMMEND USING A SHIPPING METHOD THAT INCLUDES INSURANCE, TRACKING & DELIVERY CONFIRMATION.

CUSTOMER INFORMATION					
RMA #:					
CO	MPANY:	:			
CONTACT:			PHONE:		
PARTS ENCLOSED					
	QTY	PART#	DESCRIPTION		
1					
2					
3					
4					
5					
6					
PLEASE MARK THE REASON(S) FOR RETURN:					
	ORDEF	RED WRONG ITEM			
	DID NOT NEED AFTER ALL				
	RECEIN	RECEIVED WRONG ITEM			
	OTHER	\(\)			
RETURNS WILL NOT BE ACCEPTED FOR SPECIAL ORDER PARTS					

RETURNS WILL NOT BE ACCEPTED AFTER 60 DAYS

RETURN PARTS TO:

D&S VENDING, ATTN: RETURNS, 2062 E 70TH ST, CLEVELAND, OH 44103

THIS FORM MUST BE COMPLETED & MUST ACCOMPANY ALL RETURNS

	D&S USE ONLY:	
DATE OF RECEIPT:		
RESTOCKING FEE:		
CREDIT SHIPPING:		
NOTES:		