

≡ AIRR ≡ *engineering*

RETURN FORM

Contact Name: _____

Company Name: _____

Street Address: _____

City, State, Zip Code: _____

Phone Number/Email: _____

RMA # _____

Item	Model	Description	Serial #	Purchase Date*	Reason
1					
2					
3					
4					
5					

*If known

Reason for Return	
A	Warranty
B	Repair
C	Calibration
D	Refund

Returns for refund will only be considered for complete, unused items in original condition and will be subject to a 10% restocking charge.