

REQUEST for Return Authorization Form

from PC Components Company, LLC

Customer Instructions:

1. Complete the **blue sections** of this Form and return it via:
 Fax: (732) 793-6031 or
 Email: Support@PCComponents.com
2. To expedite processing, return with a copy of the original invoice.
3. Upon return of this form PC Components will promptly issue a RA number with instructions for return shipping.

Date

Name

Company

RA # _____ ISSUED _____
RA Numbers are Valid for 14 Days

WRITE THIS RA NUMBER CLEARLY ON THE OUTSIDE OF THE PACKAGE. ANY PACKAGES RETURNED WITHOUT A VALID RA NUMBER WILL BE REFUSED.

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PCC Quote #	PCC Invoice #	PCC Item #	MFG Part # Ordered	Date Received	QTY Returning	DC	Ordered by:
Return Reason:							

CUSTOMER REQUEST:

- Please send replacements or refund if replacements are not available
- Please Refund

Please Do Not Write Below This Point. For Internal Use Only

Re-inspection Date: _____ Inspected By: _____

Confirmed MFG PN: Yes No Explain: _____

Confirmed QTY: Yes No Explain: _____

Confirmed Return Reason: Yes No Explain: _____

INSPECTION RESULTS: PASS FAIL Explain: _____

IC Recommendation: Stock Vendor Customer Not Worthy Other: _____

CAR Created: Yes No CAR #: _____

RA Approved: Yes No Approved By: _____ Credit Memo #: _____