			_APM In	1C		
Returns (Please print	<b>s Form</b> the appropriate inform	nation below)	Question	s? Call us	s Toll-Free 1	1-800-282-931
Step 1	Return Authori	zation #	Original Invoice #			
Step 2	Originally Purc	hased by:	Send Refund or Exchange to: (if different)			
Name:			. N	ame:		
Address:			A	ddress:		
(City)	(State)	(Zip)	(	City)	(State)	(Zip)
Phone: (	)		_ F	hone: (	)	
Email Address:			Email Address:			
Reason Codes	:					
		ing Damage 05 Ordered Wrong Item g Item Shipped 06 Ordered Wrong Size				
-	Original Payn					
			ount: \$			
	fer Date		ount: \$			
	l #					
Expiration	Date					
CVV #		<del></del>				
Amount \$_						
Step 5						

Fax or email the completed form to APM Inc.

Fax # (404) 768-6018

Email: sales@apmengineparts.com