



**AUTOMANN**<sup>INC</sup>  
**KEEPING TRUCKS MOVING**

WAREHOUSE:

DATE: \_\_\_\_\_

NJ  CA  TX  IL

## Return Merchandise Authorization Form

To return a part for claim, complete all required fields and email to your sales representative. After we receive this form, we will email you a Return Merchandise Authorization (RMA) form for your claim or return.

Select One:  *Warranty*     *New In Box*     *Shipping Error*

Customer Name:

Company:

Phone:

Email:

Order #:

PO #:

Part #:

Quantity:

Time In Service:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Reason For Return:

Please include pictures of the part(s) in question. Include pictures of all applicable items:

- Defective or faulty part*
- Label on the part*
- Any logo or marking*
- Production code*