

STEINER TRACTOR PARTS, INC.

MERCHANDISE RETURN FORM

1. Check One:

EXCHANGE RETURN

Merchandise Return Procedure:

1. REVIEW MERCHANDISE RETURN POLICY.
2. CALL FOR A RETURN AUTHORIZATION NUMBER!
3. COMPLETE AND SUBMIT THIS FORM WITH ALL RETURNS AND / OR EXCHANGES.
4. REPACKAGE ITEMS ACCORDINGLY TO PREVENT DAMAGE DURING SHIPMENT.

2. Return Authorization Number:

PHONE 1-800-234-3280

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SHIP FREIGHT PREPAID TO:
 Steiner Tractor Parts, Inc.
 1660 South M-13 • Lennon, Michigan 48449
WE WILL NOT ACCEPT COD'S ON RETURNS.
 Please insure items valued at \$100.00 or more.

3. Reason (Check One):

- | | |
|--|---|
| <input type="checkbox"/> RECEIVED INCORRECT ITEM | <input type="checkbox"/> DID NOT ORDER |
| <input type="checkbox"/> ORDERED INCORRECT ITEM | <input type="checkbox"/> POOR QUALITY |
| <input type="checkbox"/> MISSING ITEM | <input type="checkbox"/> DEFECTIVE
<small>(Attach brief explanation)</small> |
| <input type="checkbox"/> DUPLICATE SHIPPED | |
| <input type="checkbox"/> DAMAGED IN SHIPMENT | |

4. Customer Information (Required to process your return/exchange):

CUST # _____

NAME _____
First Middle Last

ADDRESS _____
Rural Route # or Street Address Box #

CITY _____ STATE _____ ZIP _____ - _____

PHONE () _____ FAX () _____
Ext #

5. List Items Return:

QTY	STP ORDER #	DESCRIPTION	UNIT COST	TOTAL COST

List Items You Need to Order:

QTY	STP ORDER #	DESCRIPTION	UNIT COST	TOTAL COST

6. Choose Type of Payment (For Additional Items/Balance on Exchange Items):

<input type="checkbox"/> VISA	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> MASTERCARD	<input type="text"/>	Exp Date		CVV2 Code	
<input type="checkbox"/> DISCOVER		Last three digits on back of credit card			
<input type="checkbox"/> CHECK	SIGNATURE _____				