



Return Authorization Request Form (RA)

A **Return Authorization Number** issued by Aunex is required for all returns. Please complete this form and submit it to Aunex to receive a RA Number. Be sure to add this form with the return product(s).

Customer Name: _____

Contact Name: _____

Product Return Address: _____

Telephone: _____ Fax: _____ Email: _____

Date: _____

RA Number: _____ (Aunex Internal Office Use)

| Model No. | Serial No. | Description of Problem | Replacement or Credit |
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Return All Defective Products To: Aunex, Inc. 13865 Magnolia Avenue Unit C – Chino, CA 91710

Be Sure to Write Your RA# on All Address Labels and on Each Carton