RETURN GOODS AUTHORIZATION

Vaxcel International Co., Ltd.
121 E North Ave
Carol Stream, IL 60188
Tel: 630-682-8767 Fax: 630-682-8850 E-Mail: Vaxcel@worldnet.att.net

Date: _____

Account #: _____

Company Name: _____

Fax Number: _____

Contact Person: _____

Sales Rep: _____

SHIP RETURN TO : VAXCEL LTNG
121 EAST NORTH AVE
CAROL STREAM 60188

RMA#
PO#

A COPY OF THIS RGA FORM MUST ACCOMPANY THE RETURN SHIPMENT

RGA Date:

Required Information						***Completed by Vaxcel***		***Warehouse***
Item#	**QTY**	**REASON**	**Replace ?**	**Invoice Number**	**Invoice Date**	***RGA#***	***Action***	***Received***

If you have been instructed to return, please use the prepaid UPS ARS stickers that have been issued to you. (see below for more info.)

* An RGA # is not an authorization for credit. A credit memo will be issued once the return merchandise has been received and inspected.
* Vaxcel issued ARS stickers will be faxed to you with the Approved Return Authorization Sheet.
* If you have been instructed to field destroy, a credit memo or replacement will be issued within 10 business days.
* Use a copy of this form as the packing list.
* Should Vaxcel find the products to be non-defective , such item(s) will incur an 20% restocking fee.
* Vaxcel is not responsible for labor charges of installation/re-installation of returned or replaced goods