

RETURN AUTHORIZATION FORM

Request From:	Request Number:	Date:
APSA #:	Invoice #:	Date:
APSA POLICY	RETURN REQUEST	DOES REQUESTED RETURN COMPLY WITH APSA POLICY?
Returns are allowed only on orders of more than 25 copies of the same title, and only for the number of books greater than 25. For example, if 30 copies are ordered, up to 5 may be returned.	Quantity Ordered: To be Returned:	Yes: _____ No:
Returns must be requested within 6 months of the original order.	Date of original order:	Yes: _____ No:
Return requests must be submitted in writing.		Yes: _____ No:
Copy of original APSA shipping invoice must be included.		Yes: _____ No:
Other		Yes: _____ No:

Authorization to Return:

This form must accompany return.

Return Denied:

No refund will be issued for publications if returned.