

# DAMAGE/PARTS ORDER FORM

<b>Date Received:</b>	
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<b>Customer Name:</b>	
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<b>Phone:</b>		<b>Invoice No.:</b>	
<b>Fax:</b>		<b>Sales Order No.:</b>	
<b>Contact:</b>		<b>Purchase Order No.:</b>	

Explanation of Problem:

ITEM	Qty	DESCRIPTION OF DAMAGED PART TO BE CREDIT/REPLACED
		<b>Total</b>

Privilege International, Inc. will accept no returns, deductions, charge backs, adjustments, and etc. without authorization.

**FOR OFFICE USE ONLY - DON'T WRITE IN AREA BELOW**

<b>Privilege Representative:</b>			
Action Taken:	Approved <b>Action:</b>		
	Disapproved <b>Reason:</b>		

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