

MONROE EQUIPMENT, INC.

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MRF

WARRANTY Material Return Form

Dealer Name	Branch Stock #
Address	Original Purchase Order
City, State ZIP	
Phone	

Return Writer		Return Via <small>(Truck, TM, Customer, Other)</small>		Return Date		Picked Up By	
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RETURNED ITEM #1

Return Qty	Part, Model #, Description	Cost	Invoice #	Terms	Tax Code

Date Item Installed _____ Date Item Failed _____

Base Unit/Equipment Item was Removed From:

Make/Manufacturer _____ Customer Name _____

Model # _____ Address _____

Serial # _____ City, State ZIP _____

Reason for Return _____

***REQUIRED* Do not use "Defective". Must list reason for return or claim may be denied.**

RETURNED ITEM #2

Return Qty	Part, Model #, Description	Cost	Invoice #	Terms	Tax Code

Date Item Installed _____ Date Item Failed _____

Base Unit/Equipment Item was Removed From:

Make/Manufacturer _____ Customer Name _____

Model # _____ Address _____

Serial # _____ City, State ZIP _____

Reason for Return _____

***REQUIRED* Do not use "Defective". Must list reason for return or claim may be denied.**

RETURNED ITEM #3

Return Qty	Part, Model #, Description	Cost	Invoice #	Terms	Tax Code

Date Item Installed _____ Date Item Failed _____

Base Unit/Equipment Item was Removed From:

Make/Manufacturer _____ Customer Name _____

Model # _____ Address _____

Serial # _____ City, State ZIP _____

Reason for Return _____

***REQUIRED* Do not use "Defective". Must list reason for return or claim may be denied.**

RETURN POLICY: Please complete ALL sections of this form. Any missing information may result in your claim being denied. All claims subject to approval by Monroe Equipment.