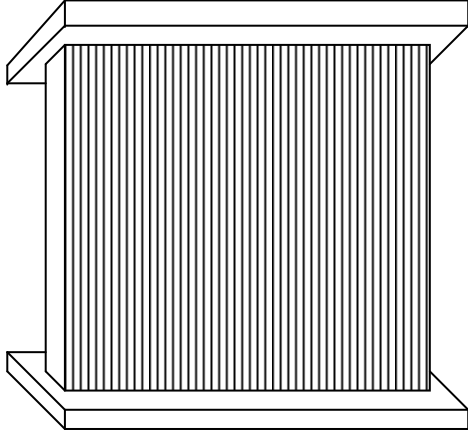


G&M RETURNS SHEET

INVOICED CUSTOMER				G&M RT REF.	
CONTACT NAME				CUST. REF.	
CONTACT NUMBER				IF THE REASON FOR RETURN IS A SUSPECTED WARRANTY OR INCORRECT SPECIFICATION, PLEASE IDENTIFY THE AREA ON THE DIAGRAM BELOW.	
DATE					
METHOD OF RETURN					
G&M PART NO	QTY	INVOICE	REASON FOR RETURN <small>please give a full description-continue on reverse if required</small>		
					

Photocopy the original or contact G&M for more sheets