


Include this sheet with your returned parts

**PRESCOTT'S, INC.**  
*Surgical Microscope Specialists*

**Prescott's Inc.**

18940 Microscope Way  
Monument, CO, 80132  
800-438-3937 Tel  
719-488-2268 Fax

## Exchange Parts Return Form

<b>Order Date:</b>		<b>Exchange Parts Policy:</b> Exchange parts must be returned within 30 days of original invoice date. You must include a copy of Exchange Parts Return Form with returned parts. If exchange parts are not received within 30 days of initial order Customer will be charged "FULL RETAIL PRICE" of the part purchased.  <b>For full credit, exchange parts must be returned by:</b> <b>01-31-1970</b>	For internal use:
<b>Business Works S/O#:</b>			<b>Exchange Number:</b>
<b>Customer Account#:</b>			
<b>Facility Name:</b>			
<b>Mailing Address:</b>			
<b>Biomed Name:</b>			
<b>Biomed Phone:</b>			
<b>Biomed Email:</b>			
<b>Prescott's Rep:</b>			
<b>Rep Email:</b>			

**Part Failure Details:**

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Thanks you for choosing Prescott's Inc!