

American Veterinary Medical Association
RETURN PROCESSING FORM

In order for us to process your return, you must fill out this form with the product you are returning. Be aware that your return will not be processed and your refund will not be issued until the item(s) is/are received back into inventory.

NOTE

Please contact **ProductOrders@avma.org** with any questions.

ORDER NUMBER _____ RETURN DATE _____ CUSTOMER ID # _____

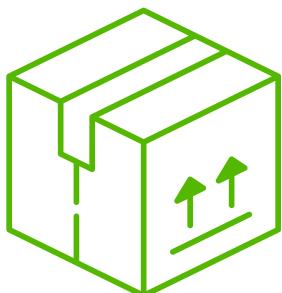
CUSTOMER NAME _____ **COMPANY NAME (IF APPLICABLE)** _____

SHIPPING ADDRESS _____ CITY/STATE/ZIP _____

BILLING ADDRESS _____ **CITY/STATE/ZIP** _____

TELEPHONE NUMBER _____ EMAIL _____

ITEMS BEING RETURNED



**PLEASE SEND THIS COMPLETED FORM
ALONG WITH YOUR ITEM(S) TO:**

American Veterinary Medical Association
c/o Order Department
1931 N. Meacham Rd., Ste 100
Schaumburg, IL 60173

Once your item(s) are received and returned to inventory, you will receive a refund for the purchase price of the product only.

