# Purpose

To identify the information of the order/article being returned for core credit in lieu of a missing or destroyed Core Return Form that was issued by ASI with the original shipment.

NOTE: This form must be returned along with your core return to ensure proper core credit. A core charge will be invoiced if the core is not received within 30 days and/or if the core fails to meet evaluation criteria. A late fee of 1.5% of the invoiced amount will accrue daily for all overdue cores.

**Completed by:** The customer.

**Instructions for Completion**

*Section 1 – Order Information*

1. Company Name – Enter the company’s name.
2. Date – Enter the date the form is completed.
3. Sales Order – Enter the Sales Order number issued by ASI. If unknown, enter N/A.
4. Sales Representative – Enter the name of your ASI Sales Representative. If unknown, enter N/A.
5. Core Tracking ID – Enter the Core Tracking ID issued by ASI. If unknown, enter N/A.
6. Customer PO – Enter the PO number applicable to the order.
7. Service/Work Order – Enter the service order or work order number applicable to the order. If unknown, enter N/A.
8. Core Due Date – Enter the due date issued by ASI. This will typically be 30 days after the order date.
9. Part Number – Enter the part number of the article being returned.
10. Serial Number – Enter the serial number of the article being returned.

*Section 2 – Shipping Information*

NOTE: If the shipping address is the same as the primary address, check the “same as contact” box.

1. Company Name – Enter the company name of the ship to address.
2. Contact Person Name – Enter the name of the ship to contact.
3. Contact Phone Number – Enter the ship to contact’s phone number.
4. Contact Email – Enter the ship to contact’s email.
5. Address – Enter the ship to address.
6. City – Enter the city of the ship to address.
7. State/Zip – Enter the state and zip code of the ship to address.
8. Country – Enter the country of the ship to address.

*Section 3 – Billing Information (check the box if same as shipping)*

1. Company Name – Enter the company name of the billing address.
2. Contact Person Name – Enter the name of the billing contact.
3. Contact Phone Number – Enter the phone number of the billing contact.
4. Contact Email – Enter the email of the billing contact.
5. Address – Enter the address of the billing company.
6. City – Enter the city of the billing address.
7. State/Zip – Enter the state and zip code of the billing address.
8. Country – Enter the country of the billing address.

NOTE: Only one Core Return Form is to be completed per serial number.

**After Completion**

* Print a copy to include with the shipment.
* If possible, email a copy to your Aircraft Specialties, Inc., Customer Service Representative.

**End of Instructions**

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| Section 1 – Order Information |
| 1. Company Name:
 | 1. Date: Click or tap to enter a date.
 |
| 1. Sales Order:
 | 1. Sales Representative:
 |
| 1. Core Tracking ID:
 | 1. Customer PO:
 |
| 1. Service/Work Order:
 | 1. Core Due Date:
 |
| 1. Part Number:
 | 1. Serial Number:
 |
| Section 2 – Shipping Information |
| 1. Company Name:
 | 1. Contact Person Name:
 |
| 1. Contact Phone Number:
 | 1. Contact Email:
 |
| 1. Address:
 | 1. City:
 |
| 1. State/Zip:
 | 1. Country:
 |
| Section 3 – Billing Information ([ ]  same as shipping) |
| 1. Company Name:
 | 1. Contact Person Name:
 |
| 1. Contact Phone Number:
 | 1. Contact Email:
 |
| 1. Address:
 | 1. City:
 |
| 1. State/Zip:
 | 1. Country:
 |

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