



COMPONENT REPAIR REQUEST

In order to more effectively process your repair request, we ask that the following form be completed and returned with your unit when shipping to CE Avionics.

<i>CUSTOMER INFORMATION</i>	
Bill To: (Name and Address)	Ship To: (Name and Address)
Point of Contact:	Aircraft Registration: _____
Phone Number:	Return Shipping:
Fax Number:	<input type="checkbox"/> Account # _____ <input type="checkbox"/> Pre Pay + Add
Email Address:	<input type="checkbox"/> UPS <input type="checkbox"/> FedEx
Method of Payment: <input type="checkbox"/> CC <input type="checkbox"/> COD <input type="checkbox"/> Terms P.O. # _____	<input type="checkbox"/> 2 Day <input type="checkbox"/> 3 Day <input type="checkbox"/> GRD
	<input type="checkbox"/> Overnight Standard <input type="checkbox"/> Overnight Priority
	<input type="checkbox"/> FedEx Express Saver
	(Approved Account Required)

<i>COMPONENT INFORMATION</i>		
Part Number:	Model:	Serial #:
Describe the Problem:		
Customer Notes and Instructions:		

X _____
(Customer Signature)

(Date)