## **REPAIR AUTHORIZATION**

MARCH 2024



		RA Case #
RETURN THIS FORM WITH EQUIPMENT		
Customer Name:	Customer #:	
Contact Name:	Contact Phone	2:
Contact Email:		
Repair Evaluation Equ	uipment Exchange	Equipment Purchase
Part Number:		
Serial #	Asset#	
Equipment issue to aid in evaluation:		
Ship equipment to:		
C. R. Laurence Co. Inc.,		
Attn: RA Case #		
2503 E. Vernon Ave.		
Los Angeles, CA 90058		