



CORE RETURN FORM

PPP INVOICE #: \_\_\_\_\_

DATE OF RETURN: \_\_\_\_\_

PART NUMBER: \_\_\_\_\_

SERIAL NUMBER: \_\_\_\_\_

PART DESCRIPTION: \_\_\_\_\_

YOUR COMPANY NAME: \_\_\_\_\_

YOUR COMPANY ADDRESS: \_\_\_\_\_

\_\_\_\_\_

SQUAWK: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PLEASE RETURN CORE WITH THIS DOCUMENT WITHIN 30 DAYS OF INVOICE DATE TO:

POWER PACKS PLUS, LLC  
ATTN: CORE RETURNS  
1380 GREG STREET, SUITE 203  
SPARKS, NV 89431 – U.S.A.  
TEL: 775-322-8555

1380 GREG STREET, SUITE 203 - SPARKS, NV 89431 – U.S.A.  
TEL: 775.322.8555 – FAX: 775.322.8562  
[www.powerpacksplus.com](http://www.powerpacksplus.com)