

MACASE INDUSTRIAL GROUP R.M.A. FORM

FOR MACASE USE ONLY:

RMA # _____	DATE: ____/____/____
ISSUED BY: _____	__REPAIR/REPLACE __CREDIT

PLEASE COMPLETE THE FOLLOWING:

CO. NAME: _____	CUST# _____
TEL: _____	FAX: _____
CONTACT PERSON: _____	EXT# _____

PLEASE COMPLETE THE FOLLOWING:

	I/V NBR	I/V DATE	ITEM NBR	Q'TY	PROBLEM DESCRIPTION	S/N NBR
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

ADDITIONAL COMMENTS: _____

- 1 ALL GOODS TO BE RETURNED MUST BE ACCOMPANIED BY RMA NBR. AND A COPY OF ORIGINAL INVOICE & THIS RMA FORM.
- 2 THE RMA NBR IS ONLY VALID FOR 14 DAYS FROM THIS ISSUE DATE.
- 3 TO RECEIVE A REFUND OR CREDIT, PRODUCT MUST BE RETURNED WITHIN 30 DAYS FROM I/V DATE. RETURNED MERCHANDISE SHOULD BE IN RESALABLE CONDITION WITHOUT MISSING PARTS.
- 4 PRODUCTS RETURNED OVER 30 DAYS MUST BE AGREED UPON BY MACASE, AND THE CUSTOMER AGREE TO PAY 25% RESTOCKING FEE.
- 5 ALL SPECIAL ORDER ITEMS SUCH AS CPU, MEMORY, SHIPPING, AND ASSEMBLY ARE NON-REFUNDABLE.
- 6 NO THIRTY PARTY RMA SERVICE, ONLY MACASE INVOICE TO CUSTOMER.
- 7 PLEASE KEEP THIS FORM IN ORDER FOR US TO SERVE YOUR BUSINESS BETTER.

PLEASE COMPLETE THE ABOVE AND FAX IT BACK TO **(770) 840-7006**. THANKS !!

**THANK YOU FOR YOUR INFORMATION. THIS FORM WILL BE FAXED BACK TO YOU WITH A RMA NUMBER WITHIN 24 HOURS. 2003.form..5