

IMPORTANT RMA PROCEDURES



1. Please complete the RMA form with detailed descriptions of the problem for your product.
2. FAX this completed RMA form with a copy of the original purchase invoice to 918.438.2014
3. All RETURNING product serial numbers must match with the original invoice.

Complete this form and FAX / BRING it to the RMA Dept. WITH a copy of your purchase INVOICE

**Company Info**

Company:	
Phone:	Fax:
Contact person:	Date Faxing This form:

**Product Info**

QTY	ITEM	FULL SERIAL	INVOICE # and Date	DETAILED PROBLEM

**For RMA Use Only**

RMA#

Total Pieces

Special Requests:
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