

Return Merchandise Authorization Form



Email form to: tommy.ruiz@R4-integration.com
 Attention: Tommy Ruiz
 Phone: 850-226-6913 x1213

RMA Steps: 1. Fill out this form completely 2. Email per above

For Office Use Only	Company Name:
	Account Number:
RMA Number:	Ship To Address:
Date RMA Issued:	City: State: Zip Code:
Processed By:	Requested By:
Item Returned: Yes / No	Email:
Date Received:	Phone:

Quantity	Part Number	Description	PO Number	Serial Number <small>(if applicable)</small>	Reason Code	Credit, Replace or Repair?

Return Reason Codes	Comments / Special Instructions																		
<p>Record appropriate number in the "Reason Code" column above.</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: small;"> <tr><td>DEMO</td><td>Demo Return</td></tr> <tr><td>EVAL</td><td>Evaluation Return</td></tr> <tr><td>FAIL</td><td>Failure</td></tr> <tr><td>ORD</td><td>Order in Error</td></tr> <tr><td>SHIP</td><td>Shipment Error</td></tr> <tr><td>ROT</td><td>Stock Rotation</td></tr> <tr><td>OUT</td><td>Out of Warranty</td></tr> <tr><td>LEA</td><td>Lease Return</td></tr> <tr><td>UPD</td><td>Update</td></tr> </table>	DEMO	Demo Return	EVAL	Evaluation Return	FAIL	Failure	ORD	Order in Error	SHIP	Shipment Error	ROT	Stock Rotation	OUT	Out of Warranty	LEA	Lease Return	UPD	Update	
DEMO	Demo Return																		
EVAL	Evaluation Return																		
FAIL	Failure																		
ORD	Order in Error																		
SHIP	Shipment Error																		
ROT	Stock Rotation																		
OUT	Out of Warranty																		
LEA	Lease Return																		
UPD	Update																		

If items need to be returned, please ship to the address below <u>after</u> receiving an RMA number :	For Office Use Only
R4 Integration, Inc. 45 Beal Parkway NE Fort Walton Beach, Florida 32548 Tommy Ruiz 850-226-6913 x1213 Receiving Hours: 8:00am - 5:00pm CST M-F	Credit Issued: Yes / No Credit Amount: Transaction Number: Date Issued: Issued By: Comments: