

RETURN MATERIAL AUTHORIZATION (RMA) FORM FOR ACCESSORIES

COMPANY NAME: CONTACT PHONE NUMBER: CONTACT PERSON:	DUNNING DATE: SALE INVOICE NUMBER: SALE INVOICE DATE:	
PART NUMBER: LOT NUMBER: HOURS OF USE: FAILURE DESCRIPTION:		
PICTURES OF THE PRODUCT: (Attach photos of the product from all possible angles and/or of the failure)		
*Filling out this form does not guarantee that the item is under warranty. It is Modelix or the supplie by the warranty.	r who, after checking, will decide	if the article is covered
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TECHNICAL DEPARTMENT NOTES:		