ATACOM, INC. Return Merchandise Authorization Number Request Form

To request a Return Merchandise Authorization (RMA) number, please review the RMA policies at http://www.atacom.com and complete this form and fax it to (510) 933-1204. ATACOM RMA Department will issue an RMA number based on the information contained in this form. Notification of the RMA number will then be faxed to the fax number or e-mail to the e-mail address you provided.

Print All Field Customer Name*: Phone Number*: Fax Number: Address: Sales Order No.*:		Company Name: Evening Phone Number: E-mail Address*:			
		Order Date :		_'	
Item Description:		Serial Number*:			
Detail Problem Descri	ption:				
Receive RMA Numb	er: Fax E-mail	Action Requested*	*: □ F	Replace	ement Refund
For ATACOM, INC RMA #:	C. RMA Dept. Use Only Issued By:	Date:		Valid	d Through
RMA Policy:	 for non-defective prode An RMA number is val CPUs MUST received A 15% process fee base 	ndise. A \$19.95/hr Diaguct. lid for 10 days. by ATACOM, Inc withined on current item price t Updated Price X 0.85 ADE IN for CPU and Monosible to replace a defent.	n the w will be . emory.	varranty pe charged Only re item by	period. d on all returned produce eplacement with the sam
I have read and agree t	o the policies stated above	;			
Print Name*:	Signature*:				Date*://
	RMA request to be proce				