

| RMA# | |
|-------|--|
| | |
| Date: | |

RMA Request Form

IF YOU NEED TO RETURN ANY FORESEESON PRODUCT FOR REPAIR, PLEASE USE THE FOLLOWING PROCEDURE.

- 1. Fill out RMA Request Form and obtain RMA# from Foreseeson by emailing to service@foreseesonusa.com
- 2. A tag must be attached to each product with the proper RMA# and detailing the reason for the return.
- 3. It is preferrable that the original packaging be used to prevent damage. The customer is responsible for delivering the returned product to Foreseeson safely and undamaged.
- 4. The RMA# must be clearly marked on all returned product, boxes, packages, and accompanying paperwork.

The RMA# obtained is valid for 30 days from the date issued.

Please help us process your request as quickly as possible by following the above procedure.

| | | riedse help us process your requ | | Thank You | onowing the above | procedurer | |
|----------------------|---------------|----------------------------------|------------------|---|-----------------------------------|------------|--|
| Billing Address | | | | Shipping Address | | | |
| Contact Name: | | | | Contact Name: | | | |
| Company Name: | | | Company Name: | | | | |
| Address: | | | Address: | | | | |
| | | | | | | | |
| Phone: Fax: | | | Phone: | Phone: Fax: | | | |
| Email Address: | | | Email Address: | | | | |
| | | | Produ | ct Information | | | |
| Item | P.O. or Inv.# | Model / Part No. | | Serial No. | Symptom (as detailed as possible) | | |
| 1 | | | | | | | |
| 2 | | | | | | | |
| 3 | | | | | | | |
| 4 | | | | | | | |
| Special | instructions: | | | | | | |
| | | Foreseeso | on Cus | tom Displays Us | se Only | | |
| RMA issued by: Date: | | | RMA received by: | | Date: | | |
| | | I 2210 E. Winston Road·A | | son Custom Displays CA 92806 · Ph:(714)300-0 | 0540 Fax:(714)300-0546 | | |