

# RMA Request Form

## SP Peripherals

48521 Warm Springs Blvd. #305 Fremont, CA 94539

Tel: 510-438-0111 email: miles@spperipherals.com

Contact Name: \_\_\_\_\_

Received Date: \_\_\_\_\_

Company Name: \_\_\_\_\_

Received By: \_\_\_\_\_

Telephone: \_\_\_\_\_

RMA # \_\_\_\_\_

Tracking #: \_\_\_\_\_

	Item #1	Item #2	Item #3	Item #4
Part #:				
Quantity:				
Invoice #:				
Invoice Date:				
S/N:				
Problem:				

### For Internal Use Only:

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Note: All information must be provided before an RMA# will be issued.  
RMA# only good for 10 days from the date issued.