

RETURN MERCHANDISE AUTHORIZATION (RMA) FORM

INSTRUCTIONS

Call LaserLinc (+1 937.318.2440) to request an RMA number.

Include the RMA number in the ATTN: line of the SHIP TO ADDRESS for faster processing.

Carefully package the equipment (in LaserLinc's original packaging if possible) and ship by a traceable method.

We recommend that you insure the shipment for the full value of the equipment.

LaserLinc is not responsible for loss or damage resulting from shipment of equipment.

Please be sure your company name and the supplied RMA number are clearly visible on the shipping label.

In the upper right, fill in the full name, phone number, and email address of the person to contact regarding the returned equipment.

Number of devices being returned: _____

Complete the table below. Provide as much detail as possible for the problem description to facilitate faster diagnosis and repair. Use multiple lines if needed. Device type examples: laser, ultrasonic, microLinc, NetLinc, BenchLinc, SmartLinc.

Device Type	Serial Number	Problem Description

PROVIDE CONTACT INFORMATION	
Name	_____
Phone	_____
E-mail	_____
Company	_____

PLACE A PRINTED, COMPLETED COPY OF THIS FORM IN EACH PACKAGE OF EQUIPMENT TO RETURN!

RETURN ADDRESS:

Company
Address
 Address 2
 Address 3
City
State
Postal/Zip Code
Country

SHIP TO ADDRESS:

**LaserLinc, Inc.
777 Zapata Drive
Fairborn, Ohio 45324-5160
ATTN: RMA _____**