



**RMA # ASSIGNED BY
ELUSA HERE**

Electronics Line USA Return Materials Authorization (RMA) Form.
5637 Arapahoe Ave, Boulder, CO 80303 800-683-6835 303-938-8062 fax

Company Name _____
Company Address _____

City _____ State _____ Zip Code _____ Country _____

Contact Name _____ Phone Number _____

Contact Fax # _____ Contact Email Address _____

1) Part # _____ Serial # _____ Quantity _____

Advance Replace ___ Warranty Replace or Repair ___ Credit ___

Original Date of Purchase _____ Invoice # _____ P.O. # _____

Detailed Description of Problem: _____

2) Part # _____ Serial # _____ Quantity _____

Advance Replace ___ Warranty Replace or Repair ___ Credit ___

Original Date of Purchase _____ Invoice # _____ P.O. # _____

Detailed Description of Problem: _____

Please ship product(s) to us via _____ Account # _____

I have read, understand and agree to the terms of the Electronics Line USA Limited Warranty and RMA Policy. Name _____ Signature _____

*****ALWAYS PUT THE RMA NUMBER ON THE OUTSIDE OF THE BOX AND A COPY OF THIS FORM ON THE INSIDE OF THE BOX. FAILURE TO DO SO MAY CAUSE SERIOUS DELAYS!*****