

10455 N.W. 37th Terrace Miami, Florida 33178 | Phone: 305.599.1108 Fax: 305.513.0419

Return Material Authorization Form

Section 1

Custome	r Name:											
Dat	e:			Customer RMA No:								
Invoice Address:				Avs	ource							
				KM	A No:							
Contact	Name:			Conta	act Phone:							
Email Address:												
ORDER INFORMATION												
	Cus	tomer:										
Purchase Order No:				Order No:								
Your Part No:				Invoice/Despatch No:								
	PRODUCT INFORMATION											
IGS Part No:				Quantity:								
Description:												
Lot/batch No:												
		RE	ASON FOR	RETUR	N							
RETURN TYPE:												
Credit		Credit &										
Only		Replace										

On receipt of the IGS RMA Number please promptly return the product and any packaging materials securely packed and carriage paid to IGS for examination.

IGS will investigate your return and will report any conclusions made as soon as possible bearing in mind the product may have to be returned to a manufacturer's facility for failure analysis in the Far East. Should the failure be attributed to customer error IGS reserves the right to re-invoice the product, charge for any repair requested and charge for any carriage costs.

IGS Standard Terms & Conditions apply

Section 2 - For Avsource Use Only.

Approved			Authorised	_	Date	
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^{**}Please note that this RMA will expire 30 days after the issued date. If the items on this RMA are not returned within the said 30 day period this RMA will automatically be cancelled and you will need to resubmit your request for RMA.