



10441 NW 28 St. – 105, DORAL FL 33172  
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**RMA FORM**

Please complete form and return via fax

Customer Information						FOR OFFICIAL USE ONLY
Name:					RMA#:	
Address:					In-Date:	
City:		State:		Zip Code:		Out-Date:
Phone:			Fax:			Rec. By:
Contact:			E-Mail:			Ship By:
QTY	Part#	Serial #	Invoice#	Inv. Date	Problem	

Notes:

- Customer must provide detailed problems for all returned items
- Form must be complete all the blanks space with all the information requested in this form
- The RMA # issued shall be valid for 30 days
- Any product received with physical damage will be not accepted
- Make sure there are no labels or stickers other than those from manufacturer on the product.
- Remember to display the RMA# on the outside of the shipping package.
- We will be not responsible for lost items.
- We reserve the right to return unauthorized items to the customer.