

RETURNS FORM

RMA No.
RMA-

Date: ___/___/___

Customer Name:	Warranty Slip No.:
Contact No.:	Warranty End Date:
e-mail:	Invoice No.:
Contact Address:	Return Address:
Model Name:	Serial No.:

Reason for Return: QTY: _____

Damaged Defective Wrong item Missing part
 Not as advertised Change of mind
 Problem Description:

Preference: <input type="checkbox"/> Replace <input type="checkbox"/> Refund () Voucher () Reimbursement (fill your bank account info. once checked)	Account Owner: _____ Account No.: _____ Bank Name: _____ Bank Location: _____ Signature: _____
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Problem Solving:

Technical Validation:	Sales Validation:
Warehouse:	Administor:

Remark:

1. Please send this RETURNS FORM to **cs@prodatanet.com.ph** to obtain a **RMA No.**
2. Fill in the RAM No. granted from Prodatanet Customer Service Center in RETURNS FORM and packed with the package.
3. Send the return package to Prodatanet's business address.