



jay@upcwholesale.com
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509.277.6065 WA. Fax
208.441.1827 ID. Fax

Date _____

Request for Return Merchandise Authorization #
R.M.A. Form must be completely filled out in order to be processed!

Co. Name _____
Address _____

Account # _____
Account Rep _____

Table with 5 columns: Item, Description, Qty, Invoice #, Invoice Date. Multiple empty rows for data entry.

Phone # _____

Your Name _____
Fax _____

Notes:

Information required can be found on our invoice and on the product sticker.

No package can be accepted without current R.M.A. # displayed on outside of package.

Ship via traceable carrier and properly insure package. No C.O.D.'s accepted.

R.M.A. expires after 7 days. Please fax to obtain new # if this occurs.

Warranty void if U-PC Wholesale sticker is removed. Unauthorized product will be returned to customer.

With everyone's help, we can make R.M.A. easy!

Thank you for your cooperation.