



A professional case manufacturer
PROCASE

PROCASE NZ LTD
 UNIT E, NO. 2 ASHFIELD ST.,
 GLENFIELD, AUCKLAND
 FAX: 09-4413207

PROCASE RMA RETURN Date: _____

COMPANY:

CONTACT:

YOUR RMA No. :

ADDRESS:

PHONE: FAX:

RETURN TYPE: Warranty Service Non Warranty Service
 DOA (Dead on Arrival) Other

PRODUCT DEALS:

No.	INV. No.	MODEL NO.	Qty	FAULTY DESCRIPTION	OFFICE		WAREHOUSE

NO.	TREATMENTS	Signature

- Please note:
1. Please return components in anti-static bags and fully padded boxes as originally provided.
 2. This RMA is subject to verification of warranty details.
 3. Write the RMA number on the OUTSIDE of the packaging in which it is being return and ENCLOSE a cope of this RMA FORM.