



**2D Electronics LLC**  
**Return Materials Authorization Form (RMA)**

**RMA #**

**Date:** \_\_\_\_\_

**BILLING / SENDER'S INFORMATION**

**Company Name :** \_\_\_\_\_  
**Billing Address :** \_\_\_\_\_  
**City** \_\_\_\_\_  
**State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Contact Name :** \_\_\_\_\_  
**Phone Number** \_\_\_\_\_  
**Fax** \_\_\_\_\_  
**Email** \_\_\_\_\_

**RETURN INFORMATION**

**Company Name :** \_\_\_\_\_  
**Company Address :** \_\_\_\_\_  
**City** \_\_\_\_\_  
**State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Contact Name :** \_\_\_\_\_  
**Phone Number** \_\_\_\_\_  
**Fax** \_\_\_\_\_  
**Email** \_\_\_\_\_

**\*\*IMPORTANT\*\***

After 30 days, any product that has been received and that has not been approved for repair will be returned to the sender and the diagnostic fee + shipping will be charged to the Credit Card provided on this RMA form.

Always put the RMA number on the outside of the box and a copy of this form on the inside of the box. Failure to do so may cause serious delays.

**PRE-AUTHORIZATION FOR REPAIR CHARGES**

Place a check in the appropriate box if you authorize repair charges, up to a certain dollar amount.

- I authorize repair charges up to \$200.00
- I authorize repair charges up to \$400.00
- I authorize repair charges OVER \$400.00, PLEASE CALL WITH ESTIMATE
- CUSTOM AUTHORIZATION : \_\_\_\_\_

**Authorized Signature**

\_\_\_\_\_

**Print Name**

\_\_\_\_\_

**SHIPPING METHOD:** \_\_\_\_\_

**CREDIT CARD INFORMATION**

**A Credit Card number is required**

Circle one : **VISA**    **MC**    **AMEX**    **DISC**

**CREDIT CARD NUMBER**

**EXP. DATE**

**Security Code**

**Authorized Signature**

\_\_\_\_\_

**Print Name**

\_\_\_\_\_

**Description of product and reason for return**

Serial Number	Model Number	Description of Problem	RMA Diagnostic Fee Approval
			<input type="checkbox"/> I approve the \$50 Diag Fee <b>initials :</b> _____
			<input type="checkbox"/> I approve the \$50 Diag Fee <b>initials :</b> _____
			<input type="checkbox"/> I approve the \$50 Diag Fee <b>initials :</b> _____
			<input type="checkbox"/> I approve the \$50 Diag Fee <b>initials :</b> _____
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