



## Return Merchandise Authorization Form

Please complete, sign, and return this form along with

# COMPLETE PACKAGE!!!

Customer Info		RMA Dept Only
Company Name:		RMA #:
Address:		Date Issued:
City, State, Zip:		Return To: <b>ALLEET</b> Attn: RMA # <i>(number issued from Alleet)</i> 2 Centerview Drive Suite 41 Greensboro, NC 27407 Tel. (888) 850-3155 Fax. (888) 808-6524
Telephone & Fax:		
Attention:		
Email:	Date:	

Date:	Invoice No.	Make/Model	IMEI / ESN:	Description of Problem:

### Terms and Conditions

Complete this form and e-mail it to [RMA@alleet.com](mailto:RMA@alleet.com)

-or-

Complete this form and fax it to (888) 808-6524

All authorized RMA's must be shipped with this completed form and the RMA number as issued by ALLEET and the **COMPLETE PACKAGE!!**

All RMA's must include the COMPLETE PACKAGE as it was sold to you to ensure proper exchange (i.e. Box, Phone, Battery, Charger, User Guide, and all other contents.)

### Acceptance and Approval

**RMA expire 14 days from issue.** Signing this agreement indicates your acceptance of the terms and conditions stated. In addition, you authorize Alleet to make any and all inquiries necessary to process this Return Merchandise Authorization Form.

Name:	Title:	Date:	Signature:
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