

	<div>ASSISTANCE</div> <div><b>RMA form</b></div> <div>Return material authorization</div>	Date:
CUSTOMER COMPILATION		
Company name:		
Referent Name:	Compilation date:	
Email:	Phone:	
Product:	Serial number:	
Defects found:		
Product:	Serial number:	
Defects found:		
Product:	Serial number:	
Defects found:		
Signature:		
<p>Attention: to obtain the RMA number you must fill in all the fields. Do not use this form for more than three products. Send this form via email to <a href="mailto:info@luxled.it">info@luxled.it</a>. Please wait for instructions from LUXLED for shipping the goods. Write the RMA number on the transport document. LUXLED is not responsible for products received without the RMA form correctly completed and with the assigned number.</p>		
<b>RMA NUMBER ASSIGNED</b>		
SECTION RESERVED TO LUXLED		
SALE DATE		
REPARATION DATE		
ENTRY DATE		
SHIPMENT DATE		
Defects found item 1:		
Defects found item 2:		
Defects found item 3:		
Substituted parts item 1:	Warranty:	
Substituted parts item 2:	Warranty:	
Substituted parts item 3:	Warranty:	
<b>Note</b>		
Operator:	Date:	Signature :