Lifetime Memory Products, Inc. - RMA Request Form

Please leave gray areas blank RMA# Date Contact Ship to Address for Replacement Phone # Contact Ship to Address for Replacement Contact Phone # Contact Ship to Address for Replacement Contact Please call your sales rep for non-replacement RMA's Was product purchased from Lifetime? Yes O No O Where? Contact 1 ()	Please email completed form to rma@lifetimememory.com or fax to 949-794-9023			
Company				
Contact		Date		
Phone #		Ship to Address for E	Ponlocomont	
Fax #		Ship to Address for F	Replacement	
Customer #	· · · · · · · · · · · · · · · · · · ·			
RMA Request for: Replacement O Please call your sales rep for non-replacement RMA's Was product purchased from Lifetime? Yes O No O Where?	Customor #			
Please call your sales rep for non-replacement RMA's Was product purchased from Lifetime? Yes No O Where?		<u></u>		
Please call your sales rep for non-replacement RMA's Was product purchased from Lifetime? Yes No O Where?	RMA Request for: Replacement	0		
Was product purchased from Lifetime? Yes O No O Where?		-		
RMA: Part # Invoice # Date Purchased 1 ()				
1 ()	Was product purchased from Lifetime?	Yes O No O Where?		
2 ()	RMA: Part #	Invoice #	Date Purchased	
2 ()	1 ()			
3 ()				
5 ()				
5 ()				
BOTTOM PORTION TO BE FILLED IN BY LIFETIME Received RMA Via: O UPS Ground O USPS Express Mail O Other If other please include your freight collect and method				
Received RMA Via: O UPS Ground O USPS Express Mail O Other If other please include your freight collect and method	Reason for Return & Computer Model Used in:			
Received RMA Via: O UPS Ground O USPS Express Mail O Other If other please include your freight collect and method				
If other please include your freight collect and method	BOTTOM PORTION TO BE FILLED IN BY LIF	ETIME		
Shipped on Airbill # Freight paid by: Customer O Lifetime O Product to be Replaced to Customer:	Received RMA Via: O UPS Ground	0 USPS Express Mail 0	Other	
Freight paid by: Customer O Lifetime O Date received Product to be Replaced to Customer:	If other please in	clude your freight collect and method		
Product to be Replaced to Customer: 1 () 2 () 3 () 4 () 5 ()	Shipped on Airbill #			
Product to be Replaced to Customer: 1 () 2 () 3 () 4 () 5 ()				
Product to be Replaced to Customer: 1 () 2 () 3 () 4 () 5 ()				
1 ()	Freight paid by: Customer O	Lifetime O Date received		
2 () 3 () 4 () 5 ()	Product to be Replaced to Customer:			
3 ()	1 ()			
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Approved by Processed by	- / >			
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