

RMA No.:

Remark:

## **CommFront RMA Form**

**Notes:** 1. Please email the completed form to sales@commfront.com before returning the goods. 2. A return address shall be issued to you along with an RMA number.

## Part I: Confirmation by CommFront's RMA department

Return Address:

Date:			
			Part II: Customer data Please ensure all fields below are completed for speedy process.
For re	placement (within 5 yea	ars of purch	nase) For refund (within 30 days of purchase)
Company	name:		Order no.:
Contact person:			Date of purchase:
Phone no.:			Date of request:
Fax no.:			Purchase from:
Email add	lress:		Ship-to address:
Item #	Model or Part No.:	Qty	Problem description
1.			
2.			
3.			
4.			
5.			
6.			