Return Merchandise Authorization Form

Daniel R. Smith & Associates, Inc.
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rma@drsa.com http://www.drsa.com

1. Complete this RMA form entirely.
2. Include copy of the Invoice(s) & Original Packing List for the defective good(s).
3. Send all required documents to DRSA RMA Department via Fax or Email.

DRSA OFFICIAL USE ONLY

RMA Number:	
Issued Date:	
Issued By:	

Company Name:		**Contact Name:**	
Shipping Address:		**Telephone #:**	
		Fax #:	
City:		**e-mail:**	
State:		**ZipCode:**	

(To protect customers' privacy, the above provided information will be used for RMA purpose ONLY.)

QTY	DRSA P/N	Reason For Return (Precisely describe the issue)	Invoice Number / Invoice Date	NOTES DRSA OFFICIAL USE ONLY

* Customer must fill out the form completely and provide a copy of invoice & original packing list in order to validate product warranty, repair or return by DRSA.
* Form will be returned to you by FAX or email with a Return Authorization Number. Products received without an RMA number will be refused.
* RMA number(s) must be clearly marked on outside of package to avoid having package returned.
* All return product(s) must be securely packed in box with stuffing materials. All RMA must be shipped by freight/insurance prepaid.
* Damage or loss of goods during shipment is the sole responsibility of the sender. Insufficient packaging may result in loss of warranty
* RMA No. is valid for 15 days from the issue date only.
* Turn-around time for RMA replacement(s) is approximately 15 working days from the day the package(s) received by DRSA.
* Products that are found to have no defect, will be shipped back to the customer upon his request at customer's expense.
* All products returned for credit are subject to a 25% restocking fees.

Please obtain RMA forms from

http://www.drsa.com/rma.html