

# Return Merchandise Authorization Form



Email form to: [info@uniwest.com](mailto:info@uniwest.com)  
 Fax form to: 509-544-0868  
 Attention: Krista Weber  
 Phone: 509-544-0720  
[www.uniwest.com.com](http://www.uniwest.com.com)

RMA Steps: 1. Fill out this form completely 2. Prepare a copy of the sales invoice(s) for defective good(s) 3. Email or fax per above

<b>For Office Use Only</b>	Company Name:		
	Shipping Method/Account Number:		
RMA Number:	Ship To Address:		
Date RMA Issued:	City:	State:	Zip Code:
Processed By:	Requested By:		
Item Returned: Yes / No	Email:		
Date Received:	Phone:	Fax:	

Quantity	Item Number	Description	PO Number	Serial Number <small>(if applicable)</small>	Reason Code	Credit, Replace or Repair?

Return Reason Codes	Comments / Special Instructions
Record appropriate number in the "Reason Code" column above.  1. Calibration 2. Repair 3. Other	

If items need to be returned, please ship to the address below <b>after</b> receiving an RMA number :	<b>For Office Use Only</b>
Your Company Name Ship To Address Contact Person Contact Information Receiving Hours	Credit Issued: Yes / No Credit Amount: Transaction Number: Date Issued: Issued By: Comments:

