



## Return Merchandise Authorization (RMA) Form

Please type or print clearly with all required fields and fax back to 1-408-228-6453

Name\*: \_\_\_\_\_, Order/Invoice# \*: \_\_\_\_\_

Phone#\*: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_, Evening Phone#: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-mail Address\* : \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_, State: \_\_\_\_\_, Zip: \_\_\_\_\_

Printer/Copier/Fax Cartridge#: \_\_\_\_\_, Quantity: \_\_\_\_\_

Printer/Copier/Fax Model# \_\_\_\_\_

I would like to receive RMA number via:  Fax  E-mail  Phone

Action requested\*:  Replacement  Exchange to \_\_\_\_\_

Refund (less shipping \$6.95 or shipping cost on the invoice whichever is greater)

Reason for return: \_\_\_\_\_

### RMA Policy:

1. RMA number is valid for 30 days.
2. InksOutlet.com is responsible to replace a defective item by standard shipping.
3. No advanced replacement.
4. Detail policy is listed at our website at <https://www.inksoutlet.com/policy.php?submit=returnExchange>

### I have read and agree to the policies stated above

Print Name\*: \_\_\_\_\_, Signature\*: \_\_\_\_\_, Date\*: \_\_\_\_\_

**All \* is required for RMA request to be processed.**

### Below is For InksOutlet.com RMA Department Use Only

RMA #: \_\_\_\_\_ Issued By: \_\_\_\_\_ Date: \_\_\_\_\_ Valid Through \_\_\_\_\_