



REQUEST FOR CORRECTIVE ACTION (RMA)

Date: _____

Customer: _____

Account #: _____

Action desired: Return unused ballasts Issue credit Credit and re-bill invoice

For Universal Lighting Use

QTY	Catalog Number	Purchase Order or Sales Order Number	*Date Code	\$ Value	Item Code

*All requests for return **must** reference either an order number **or** the date code on the ballasts being returned.

Is this an annual return? **Yes** or **No**

If not, reason for return: _____

Total RMA Value \$ _____

Has a replacement order been placed? **Yes** or **No**

Replacement PO # _____ Value \$ _____

Are the ballasts unused, in the original cartons, with the leads intact? **Yes** or **No**

Requested by: _____