



Precision Rated Optics

Work with a PRO!

Precision Rated Optics

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RMA #: _____

Instructions: 1) This form must be completed and emailed back BEFORE it is shipped. 2) A copy of this form must be placed inside the shipping box. 3) Please write the RMA# on the outside of the box and ship to above address.

Please complete all required fields for service approval.

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Product	*Model (Required)		*Serial Number (Required)	
	Purchase Date		Production Date	
Customer	*Company (Required)		*Telephone # (Required)	
	*Contact Name (Required)		*E-mail Address (Required)	
	*Address (Required)			
*Issue(s) (Required)				
Repair Center Only				
Date received		Return Shipment Date		Warranty Service?
Symptoms				
Repairs				
Current Unit Version #: N/A				