

ST IMAGING, INC.

RMA (Return Merchandise Authorization) Request Form

INSTRUCTIONS: Fill out this form and fax/email it to STI. A copy of this form with your RMA # will be faxed/emailed back.

Date: \_\_\_\_\_

Ship To Information:

Company Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Country: \_\_\_\_\_

Phone No.: \_\_\_\_\_ Fax No.: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Bill To Information (if different from above):

Company Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Country: USA \_\_\_\_\_

Contact Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Product Information:

Part/Model No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_ Qty. \_\_\_\_\_

Part/Model No.: \_\_\_\_\_ Serial No.: \_\_\_\_\_ Qty. \_\_\_\_\_

Reason for repair/return (Use Separate Sheet If Needed):

\_\_\_\_\_  
\_\_\_\_\_

Check box if you would like old part(s) returned with repaired product.

Return via (Please circle one below):

Ground    3-day    2-day    Overnight    Int'l Priority    Int'l Economy

Additional comments (Account number, request for expediting (fees will apply), Purchase Order Number, etc.):

\_\_\_\_\_

Ship RMA to: ST Imaging, Inc  
466 Central Ave #31  
Northfield, IL, 60093  
U.S.A.

Attn: RMA #: \_\_\_\_\_ (STI will issue and fax/email the form back)

**PLEASE FAX THIS FORM TO (847) 501-3377 TO SHIPPING YOUR PRODUCT.**  
**BE SURE TO INCLUDE A COPY OF THIS FORM WITH THE RMA # IN THE PACKAGE.**