RMA #

Issued By:

Issue Date:

Received by:

Receive Date:

Custodian:

Number of items expected:

Number of items received:

|  |  |  |
| --- | --- | --- |
| Company Name1: | Return Address1 | Comments |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Item # | Part No. & Desc1 | Serial Number #1 | Cust. ref #1 | Delivery / Invoice #1 |  | Reported fault1- Please Be As Specific As Possible | For Boston Use Only |
| Actual Fault / Fault Code | Cleared Invoice |
| **1** |  |  |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |  |  |

**1 Customer to fill these sections only**. All other sections for Boston returns department. Original invoice and Sticker number MUST be supplied. RMA # will be supplied by return fax. Returns should be sent to:

 **Boston Server & Storage Solutions GmbH,   Kapellenstr. 11, D85622 Feldkirchen, Germany**

**089 / 9090199 55**

