

SPROX REPAIR DEPARTMENT  
**RMA FORM**  
**RETURN MATERIAL AUTHORIZATION / REPAIR**

Customer: \_\_\_\_\_ Site#: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Corp Name/Franchise: \_\_\_\_\_ Fax: \_\_\_\_\_  
 Shipping Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Contact name: \_\_\_\_\_  
 Signature: \_\_\_\_\_

<u>MODEL #</u>	<u>QTY</u>	<u>SERIAL # if legible</u>	<u>PROBLEM</u>	<u>INSPECTED BY</u>

***IMPORTANT INFORMATION! Please Read carefully:***

1. Complete this form and fax back to Sprox Repair at **(231) 237-0849**.
2. The RMA# will be assigned to form & faxed back to customer.
3. Include a copy of your RMA form and original purchase invoice with the Soundogs being returned.
4. Please make sure that the RMA# is marked clearly on the outside of each box.
5. To avoid shipping damage, return all units in their original Sprox packaging or other suitable packaging.

**RMA#:**

**Warranty Exp:**

**Return Unit(s) to:**

**VIA U.P.S.**  
 Sprox, Inc.  
 01646 Sequanota Rd.  
 East Jordan, MI 49727

**VIA US MAIL**  
 Sprox, Inc.  
 PO Box 679  
 Charlevoix, MI 49720

For Internal use only:

Serial #	Problem	Fixed	Cause	Warranty	Billable	Invoice#