

PRODUCT RETURN REQUEST FACSIMILE FORM

Fax Number: 610-234-4200

Customer Number: _____ Contact Name: _____

Company Name: _____

Telephone Number: _____ Fax Number: _____

Type of Return: _____ DOA _____ Received wrong item Was product opened? Yes _____ No _____

Item No.	Invoice No.	Part No.	Quantity	Product Description
1.				
Serial No.		Problem Description		

Item No.	Invoice No.	Part No.	Quantity	Product Description
2.				
Serial No.		Problem Description		

Item No.	Invoice No.	Part No.	Quantity	Product Description
3.				
Serial No.		Problem Description		

Additional Comments: _____

Customer's Signature: _____

By signing this agreement, the customer recognizes that product identified on this form will arrive at Canon Technology Solutions in new, unopened and resalable condition. If the product does not comply with the return criteria as described in our RA Policy, the product will, at customer's discretion, be returned to the customer or be liquidated by Canon Technology Solutions at a rate of 20 cents on the dollar. Credit issued will reflect that amount.

For Canon Technology Solutions Use Only	
Return Authorization No. (RA # Item 1): _____	(RA # Item 2): _____ (RA # Item 3): _____
Issued by Returns Authorization Rep: _____	Date Issued: _____

Note: Please place the RA number on the shipping label ONLY. **Do not write on the manufacturer's original box.** RAs are only good for up to 5 days from issue date. Most hardware manufacturers require serial numbers and problem descriptions when returning defective or DOA product. Please supply the information with your request.

Incomplete forms will be returned causing delays in processing. Additional forms can be obtained at our Internet web site WWW.CTS.CANON.COM, under resources.