

Date:

PACKING LIST – RETURN MATERIAL AUTHORIZATION (RMA)

Instructions: Please fill out the form. Insert this Packing List into the package with the returned items.
 (Or use your own form with the same information.)

Ship Package to: **Control Solutions LLC**
Attn: Repair Services RMA #
2520 Diehl Road
Aurora, IL 60502-9497

Your Company Name			
Contact Name			
Phone Number	E-Mail		
Product	Serial Number	Reason For Return	
		<input type="checkbox"/> Electrical failure <input type="checkbox"/> Mechanical problem <input type="checkbox"/> Version incorrect <input type="checkbox"/> Other below	
		<input type="checkbox"/> Electrical failure <input type="checkbox"/> Mechanical problem <input type="checkbox"/> Version incorrect <input type="checkbox"/> Other below	
		<input type="checkbox"/> Electrical failure <input type="checkbox"/> Mechanical problem <input type="checkbox"/> Version incorrect <input type="checkbox"/> Other below	
		<input type="checkbox"/> Electrical failure <input type="checkbox"/> Mechanical problem <input type="checkbox"/> Version incorrect <input type="checkbox"/> Other below	
		<input type="checkbox"/> Electrical failure <input type="checkbox"/> Mechanical problem <input type="checkbox"/> Version incorrect <input type="checkbox"/> Other below	
		<input type="checkbox"/> Electrical failure <input type="checkbox"/> Mechanical problem <input type="checkbox"/> Version incorrect <input type="checkbox"/> Other below	

If taking credit, what is the Purchase Order #

Customer Tracking/Shipper #

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Control Solutions LLC

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