SPARKLE POWER INC.
1000 ROCK AVE. SAN JOSE, CA 95131
TEL:408-519-8888X160/152, FAX:519-9999

RMA

DATE: / /

RMA NUMBER:

COMPANY NAME: PHONE NUMBER: FAX NUMBER:

CONTACT PERSON: RTV NUMBER:

ADDRESS:

RMA TYPE: ☐ RMA RETURN ☐ EVALUATION RETURN ☐ 2ND RMA

PLEASE REFERE TO OUR RMA POLICY ON OUR WEB SITE WWW.SPARKLEPOWER.COM

FOR SPI USE ONLY

PART NUMBER	S/N	REASON FOR RETURN	INVOICE		INSPECTION RESULT	ACTION	Remark
			NUMBER	DATE			

FOR SPI USE ONLY

RECEIVE DATE: / / SHIPPED DATE: / / SHIP VIA: / /

TOTAL: PCS BOXES TOTAL WEIGHT: LBS TRUCKING NUMBER

CM NUMBER: MTR NUMBER: