sai ENTRY FORM

Return Authorization

SYSTEMS ASSOCIATES, INC. / 1932 Industrial Drive / Libertyville, Illinois 60048 / **(847) 367-6650** / FAX: (847) 367-6960

RA#

Your initials plus the Date (ie: SJB-041901)

From:

Company (and dealer) Name

Contact:

Name of Person to Contact with Questions

Phone:

Phone Number of Person to Contact with Questions

Email:

Email Address of Person to Contact with Questions

Equipment:

Describe Equipment Being Returned

Problem:

Describe the Problem with the Equipment

Disposition:

What is to happen with these parts when the repair is Completed

Comments:

Add any Comments for our Technicians

On Arrival Notify:

Let us know if someone should be contacted when the Parts Arrive