

Thank you for your interest in Optoma;

This RMA form has been moved.

We'll take you to it!

CLICK ANYWHERE to view the new online form.

Thanks again for choosing Optoma!

ress)

at Rep you spoke with: _____ RMA Class: For Optoma Use only _____

_____ Fax: _____

_____ Serial #: _____

otes: _____

Policy:

urchase establishing warranty coverage. Warranty coverage is effective from the
se, improper handling or packaging is not covered. (See warranty card for

**must have an RMA number. The RMA number must be clearly marked
m without an RMA on the outside of the package will be refused.**

specifically requested to do so by an Optoma representative.
ing items unless said item was requested to be sent in and is

improperly packaged units may be considered to be void of warranty.

site at www.optomausa.com.

own original specification label (With serial number).

must be shipped freight prepaid, insured, and placed in its original shipping
anty returns, inbound shipping cost to Optoma will be paid by the customer.

ys round-trip freight. Out-of-warranty units, or damage not under the
r. Repairs will be performed upon receipt of payment.

r must write "NO COMMERCIAL VALUE" on the box and shipping bill. It is also
e bill that the unit is being returned for repair only. Optoma is not responsible for

AX this completed RMA form with a copy of your receipt to:
Fax # 510-897-8601

o the following format and ship your package to:

Email: support@optoma.com

