



RMA Form

RMA Number	
Date	
Enclosed Item(s)	
Name	
Address	
City	
State	
Zipcode	
Country	
Phone Number	
Email Address	

This form must be filled clearly and mailed with the item to:

**RMA Department
CaptiveWorks Inc.
5838 San Fernando Rd Unit A
Glendale, CA 91202
USA**