

Returns Number (R.A.N):

Order Number:

Customer Details

Full Name:

E-mail Address:

Telephone Number:

COMPLETE ALL INFORMATION ON THIS FORM. RETURNS CANNOT BE ACCEPTED WITHOUT VALID R.A.N.
LABEL OUTER PACKAGE AS "RETURNED GOODS" AND SEND TO:
LEAMAN COMPUTING LTD
ASQUITH HOUSE, UNIT 1
DYFRIG ROAD.
CARDIFF. CF5 5AD. U.K.

Description of returned product(s):

Include serial numbers where applicable

Full description of problem:

STAFF USE ONLY

Received and checked by:

Date received:

Accessories received:

Condition of product(s) received:

Fault confirmed:

Date processed:

Processed by: