		7	
RMA#			
# of Devices			
Issued To:			
Company			
Address 1:			
Address 2:			
City:			
State:			
Filled out by Customer	RMA will be provided by Gret	Must Be GI (iFLO Pro) #	Must Be iFLO

Otato.						
Filled out by Customer	RMA will be provided by Gret Innovation Returns center	Must Be GI (iFLO Pro) #	Must Be iFLO Pro Description- Product line reference		Filled out by Customer	
OEM	OEM_RMA	SKU	Description	QTY	REQUEST_DATE	FAILURE COMMENTS
iFLO Pro						
	=					