



Returns Materials Authorization

Must submit one form for each device
Not valid for return without issued RMA#

For Multiple devices use multiple pages
Valid for return within 30 days of issue only

Fax form to 954-775-3538

Customer Section

Company Name: _____ Contact: _____

VirtuOx Login (If requesting data retrieval): _____

Fax#: _____ Return Address: _____

Phone Number: _____ Email: _____

VPOD Handheld VPOD CAPOX VPOD Freedom VPOD ULTRA

Battery Issues USB Issues Display Issues Error Codes

Serial Number: _____ Requested by: _____

Describe Problem: _____

Received Section

RMA #: _____ RMA Date: _____

Comments: _____

Actions Taken

Replacement Device Shipped Serial # of Replacement _____

New Device shipped

Firmware update/re-flash

Nothing wrong with device Fixed Door/Button

Employee Name: _____ Date Shipped: _____

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