



COMMERCIAL INVOICE
NUMBER: RMA _____

DATE: _____

SHIP FROM:

Your company info here:

Company Name _____
Address1 _____
Address2 _____
City, Province, Postal Code, Country _____
Contact Name _____
Phone _____
Email _____

SHIP TO: Primera Technology
141 Cheshire Lane, Suite 500
Plymouth, MN 55441
(763) 475-6676
Attn: Returns Department

<u>QTY</u>	<u>PRODUCT DESCRIPTION</u>	<u>VALUE OF GOODS</u>
1	_____	\$ _____

SERIAL# _____

COUNTRY OF ORIGIN: USA

HTS: 9801.10.1045 USA GOODS RETURNED

PRODUCTS RETURNING TO ORIGINAL MANUFACTURER
FOR WARRANTY EXCHANGE OR REPAIR
NO COMMERCIAL VALUE
VALUE FOR CUSTOMS PURPOSES ONLY

SIGN HERE

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