



RETURN FORM

mmasilver.com | mmasilver@mmasilver.com | 1-800-531-5316

Customer Name: _____

Customer Code: _____

Invoice # _____

Order Date: _____

Item Number:

Return Reason:

Item Number:	Return Reason:

Select One: Account Credit | Replacement

Return the completed form and images showing the entire item and close-up photo of the defect area to mmasilver@mmasilver.com