



# LAZARUS DATA RECOVERY

2630 Judah Street  
San Francisco, CA 94122  
Phone: 415-812-2760

YOUR RA# \_\_\_\_\_

## PERSONAL INFORMATION

Name: \_\_\_\_\_  
Business Name \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## MEDIA INFORMATION

Under Warranty? Y N  
Media Type/Manufacturer/Model \_\_\_\_\_  
\_\_\_\_\_  
Method/No. of Partitions \_\_\_\_\_  
Operating System/Ver. \_\_\_\_\_  
Computer Manufacturer ./ Model \_\_\_\_\_  
Data Compression Name/ Version \_\_\_\_\_  
Failure Symptoms \_\_\_\_\_  
\_\_\_\_\_  
Files Desired to Be Recovered \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SHIPPING INFORMATION

Please call for a RA Number before sending in the drive. We recommend all drives to be put in an anti-static bag with about 2 inches of foam or bubble wrap. Please include the Service Agreement along with this form with the drive. Also write the RA Number on the outside of the box. Ship packages to the above address.