

RETURN MERCHANDISE AUTHORIZATION FORM



Please contact Exarchy Holster Co. customer service prior to completing this form and sending your return to us. You will need an RMA number to input on the form, below. Include this form in your returned package.

RMA # _____

Mail To: Exarchy Holster Co.
ATTN: Returns RMA # (Please put RMA# provided)
18695 Pony Express Dr. #2926
Parker, CO 80134

Please check one box: Exchange Product Repair Product Refund

| | | | |
|--|---|-------------|--|
| NAME: | | | |
| ADDRESS: | | | |
| ADDRESS LINE 2: | | | |
| CITY: | STATE: | ZIP: | |
| PHONE: | | | |
| EMAIL: | | | |
| ORDER #: | | | |
| ITEM QUANTITY: | | | |
| ITEM DESCRIPTION: | | | |
| REASON FOR EXCHANGE, REPAIR, or REFUND: | | | |
| PAYMENT/REFUND INFO: | <input type="checkbox"/> Use credit card on file <input type="checkbox"/> Check in package <input type="checkbox"/> Call for info | | |

Items sent back for repair will be repaired or replaced at our discretion. Holsters that require replacement will be replaced with the current equivalent model. We cannot return items that have been replaced under our limited LIFETIME warranty. Custom products may not fall within our limited LIFETIME warranty for replacement. Please contact customer service if you wish to discuss warranty on custom products.