

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)

Return Address Provided with Approved RMA

Please check one box:

Exchange Product

Repair Product

NAME:				
ADDRESS:				
ADDRESS LINE 2:				
CITY:		STATE:		ZIP:
PHONE:				
EMAIL:				
ORDER #:				
ITEM QUANTITY:				
ITEM DESCRIPTION:				
REASON FOR EXCHANGE or REPAIR:				
PAYMENT/REFUND INFO (if applicable):	<input type="checkbox"/> Cash (Do Not Mail)	<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.