

Consumer Product Return Authorization Statement

Consumer Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Product Name/Model: _____

Serial Number: _____

Date of Purchase: _____

Place of Purchase: _____

Reason for Return

Returned Items Condition

Is the product unopened? _____
Is all original packaging included? _____

Authorization

I hereby declare that the above information is accurate and request authorization to return the described product in accordance with the company's return policy.

Consumer Signature: _____
Date: _____

Authorized By: _____
Authorization Number: _____
Date of Authorization: _____