

Returns Dept: #2225 – 21331 Gordon Way, Richmond, BC V6W-1J9 Canada
1-888-327-9663

E-Mail: ranumber@horsemanshop.com
www.horsemanshop.com

RETURN AUTHORIZATION FORM

Please fill this form out completely!

Sold To:
Name: _____
Address: _____
City: _____
State: _____ Zip: _____
Country: _____
Phone: _____ Fax: _____
Email: _____

Method Of Original Payment:

__ Visa __ MasterCard __ PayPal __ Check __ M/O

Name on Card: _____

Last 4 digits of Credit Card #: _____

Expiry Date: _____

PayPal Email: _____

Copy of Invoice Included? Yes No

Order id # _____

Cart Code	Product Description

Explain your request ie: what you want items you want exchanged

Merchandise may be returned within 90 days from the date of order in original packaging material.
There is a 15% administration fee on all refunds. No fees for exchanges.

Original shipping and handling and return postage charges will not be refunded. Manufacturer defective merchandise will be exchanged if returned within 90 days from the date of order. No refunds for Manufactured Seconds, Discounted or Bargain items.

For Office Use Only:	** US & INTERNATIONAL CUSTOMERS **				
Received By: _____	=====				
Condition: _____	DO NOT SEND PACKAGE BACK BY UPS COURIER SERVICES.				
Date Received: _____	=====				
Comments: _____	To avoid additional fees, return your package by FIRST CLASS MAIL to				
	HorsemanShop.com Attn: Returns Department, 2225 - 21331 Gordon Way, Richmond, BC V6W 1J9 Canada				
	You will need the Postal Service Customs Declaration Green or White sticker (supplied by your postal outlet).				
	Include the following:				
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 50%;">a) in the description box write</td><td style="width: 50%; text-align: center;">"RETURNING CANADIAN MANUFACTURED PRODUCT".</td></tr> <tr><td>b) Customs Value</td><td style="text-align: center;">\$0.00</td></tr> </table>	a) in the description box write	"RETURNING CANADIAN MANUFACTURED PRODUCT".	b) Customs Value	\$0.00
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All returns MUST be accompanied by this form.