

FROM THE OFFICE OF NATHAN HARRISON RETURN AUTHORIZATION REQUEST

DATE: _____

TO: _____
Name of manufacture

FROM: _____ FAX # _____
Name of Account

ADDRESS _____

CITY/ST/ZIP _____

STYLE# _____ COLOR _____ SIZES _____ (S) _____ (M) _____ (L) _____ (XL)

STYLE# _____ COLOR _____ SIZES _____ (S) _____ (M) _____ (L) _____ (XL)

INVOICE # _____ -DATE _____

SITUATION:

PLEASE REPLACE THIS ITEM: YES IF POSSIBLE _____ NO _____

RETURN AUTHORIZATION NUMBER GIVEN BY MANUFACTURE

RA# _____

- 1) Send this form back to Nathan Harrison FX 952-944-0200 done _____
- 2) You will get an RA# from the company directly or from Nathan done _____
- 3) Enclose an inventory and a copy of this form IN THE BOX done _____
- 4) WRITE THE RA# CLEARLY ON TOP OF THE BOX done _____
- 5) Send the box back to the manufacture ...NOT NATHAN done _____