

# Techna Clip Return and Exchange Form

Please send your product to:

## Techna Clip Returns Department

2184 Channing Way #129

Idaho Falls, Idaho 83404

Phone: 801-216-4790 Email: [support@technaclip.com](mailto:support@technaclip.com)

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Order#	Customer Name
Date:	Address:
City, State, Zip:	
Phone:	Email:
Purchased From:	Model:

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LET US KNOW THE REASON FOR THE RETURN: WHEN RETURNING AN ITEM, GIVE DETAILED INFORMATION. PROVIDE CONDITIONS, REASONS AND ANY ADDITIONAL INFORMATION YOU FEEL WILL BE USEFUL.

PLEASE BE ADVISED THAT WE ACCEPT RETURNS WITHIN THE FIRST 30 DAYS FROM THE DATE OF PURCHASE. ALL OF THE PARTS/ITEMS MUST BE INCLUDED ALONG WITH THE PACKAGING. THE PARTS/ITEMS THAT YOU ARE RETURN MUST BE IN GOOD CONDITON FOR YOU TO RECEIVE A REFUND.

WE ARE NOT RESPONSIBLE FOR ANY DAMAGE OR LOSS OF THESE ITEMS. MAKE SURE THE PRODUCT IS ADEQUATELY PACKAGED AND INSURED AS TECHNA CLIP IS NOT RESPONSIBLE FOR DAMAGE THAT OCCURS DURING SHIPPING. RETAIN YOUR TRACKING INFORMATION WHEN SHIPPING YOUR ITEM. ONCE YOUR ITEM IS RECEIVED BY THE RETURNS DEPARTMENT YOU WILL BE NOTIFIED. PLEASE ALLOW 1-3 BUISNESS DAYS FOR YOUR RETURN

SIGNATURE: \_\_\_\_\_ DATE \_\_\_\_\_