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| • | TO: |
| | Affordable Security |
| | 169 Rae Ave. |
| | suite B |
| | Mansfield, Ohio 44903 |
| | Figure 11 and 11 |
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| RMA # | |
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| | d Here |
| 200 | |
| : | |
| Name Of Purchaser | |
| Contact Info: | |
| Phone # and Email address: | |
| Item(s) being Returned: | |
| Original Sales Receipt # | |
| Remarks: | |
| Remarks. Please give very detailed descrij | ntion of symptoms |

RMA numbers are valid for 10 business days only.

DO NOT WRITE ON THE OUTSIDE OF THE BOX. Any package with writing on the outside will NOT be accepted by the warehouse.

EVERY return must be accompanied by the RMA form attached to the outside of the box.

No returns accepted unless returned in the ORIGINAL MANUFACTURING PACKAGING, with all parts included.

Missing components will be charged on a per item basis.

Shipping insurance is not supplied by Affordable Security and is the sole responsibility of the customer!

Restocking fee is a minimum of 15%.

Returns will be completed within 5-15 business days of receipt of the item.