

# CUSTOMER RETURN CARD

Please contact Customer Service to obtain a Return Authorization (RA) number prior to returning products. Complete the required information and return product(s) to:  
**Freedom Innovations Returns, 425 East 400 North, Gunnison, UT 84634.**

## RETURN IDENTIFICATION

Return Authorization No.	Customer Information	Phone No.
Order No.	Serial No.	Part No.
		Size

## PRODUCT RETURN

<b>Prosthetic Feet</b>	<input type="checkbox"/> Wrong Order (Size, side, product, category, clearance, incorrect shipment received.)	
	<input type="checkbox"/> Patient Related ( Insurance denied, PT preference, Stiff, PT unavailable etc.)	
	<input type="checkbox"/> Broken (Graphite broken, movement, mechanical and/or component related.)	
	<input type="checkbox"/> Noise	<input type="checkbox"/> Other, describe:
<input type="checkbox"/> <b>Foot Shell Problem</b>	<input type="checkbox"/> <b>Liners Problem</b>	<input type="checkbox"/> <b>Accessory Problem</b>
Comments:		