

Return Request Form

Print and Fill Out This Page Enclose with product(s) authorized. The RMA# MUST BE VISIBLE ON THE OUTSIDE OF PACKAGE!	RMA#	*Must Be Valid
1. Customer Information (same as origina	al order)	
Name:		
Address:		
City:		
State:	Zip:	Phone:
Email:		
2. Reason for Return (use back if necessary)		
 All Return Requests Must Be Signe By signing Here You Are Requesti Agree with NBS Return and Excha If you are not fully satisfied with your purcha You will receive a full refund for unopened it one(1) opened item, less shipping and hand Signature_ 	ing a Refund c ange Policy Ise, you may return tems in the original dling. All returns are	nd Acknowledging that you Fully the items within 30 days from the order date. form of payment and merchandise credit for subject to a 20% restocking fee.
502 502	S Return Departmo 0 Clark Rd #407 asota, FL 34233	ent
• Be sure to write the RMA# on the outside of	the package or it v	vill be refused.
•Credits will be issued based on the condition of the bottles per our return policy.		
 After returning the bottle(s), allow 2-3 weeks the product back to our facility as well as an 	for your return to be y cost associated v	e processed. Customer is responsible for shipping vith it.
•NBS reserves the right to refuse or reject any returns and deny any and all refunds if we suspect fraudulent activity or for any reason deemed appropriate by NBS. Return requests that do not completely comply with the NBS Return Policy will be rejected. Rejected items will be sent back at the customer's expense.		
	ost, damaged, etc.	or for any other reason why the package may