



# AUTHORIZED RELEASE FORM (CONSIGNOR)

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San Gabriel, CA 91776

Consignor's name \_\_\_\_\_ Consignment No \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

S/N	QTY	Inv. No	Title	Remarks
1				
2				
3				
4				
5				

## MODE OF RETURN

☐ SELF PICK UP

☐ THIRD PARTY PICK UP

I authorize \_\_\_\_\_, who is acting as an agent on my behalf or is a  
(Please specify shipping company or 3rd party)

representative of my business, to pick up my returning item(s) from Clars L.A.. I confirm that the authorized agent/rep-  
resentative named above is **not** the end user of the property item(s).

Signature \_\_\_\_\_ Date \_\_\_\_\_

☐ SHIP OUT

Receiver name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Shipping Company \_\_\_\_\_ Shipping Fee \_\_\_\_\_

I acknowledge that I have received the above inventory and release Clars L.A. from all liability relating to damages of the in-ventory  
that may occur. By signing this agreement, I agree to hold Clars L.A. entirely free from any liability, including financial responsibility  
for damages incurred.

Signature \_\_\_\_\_ Date \_\_\_\_\_