



### Custom Shop Service Form

700 Lake Street Cambridge, MD 21613

410-901-1131

customerservice@gueriniusa.com

Please complete and include this form with your firearm

#### Customer Information

Name \_\_\_\_\_

Address \_\_\_\_\_

city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_

phone \_\_\_\_\_ fax \_\_\_\_\_

email \_\_\_\_\_

Note: If you wish the firearm to be returned to an address other than the "Ship From" address, please attach an FFL for that location

Credit card # \_\_\_\_\_ Exp date \_\_\_\_\_

We accept visa, Mastercard and discover

#### Shotgun Information

Serial number \_\_\_\_\_  
*(serial number is located under top lever)*  
model \_\_\_\_\_  
gauge \_\_\_\_\_  
barrel length \_\_\_\_\_  
date of purchase \_\_\_\_\_  
Retailer \_\_\_\_\_

#### Rounds fired

Less than 2500 Specify number \_\_\_\_\_  
 Between 2500 and 5000  
 between 5000 and 10000  
 More than 10000 Specify number \_\_\_\_\_

Detailed description of services requested including customizations, additions or issues you are experiencing:

Please allow at least 20 days for completion

date \_\_\_\_\_ signature \_\_\_\_\_