



Merchandise Return Form

Original Transaction Date _____ Order Number _____ Date of Return _____

Name _____

Address _____

City _____ State _____ Post Code _____

Contact Number _____ Email Address _____

Drivers Licence Number _____ Signature _____

Reason for return (code)	Item	Qty	Unit price	Total price
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Exchange for: Item (name) _____ Color _____ Size _____ Price _____ Qty _____

Return for refund.

Return reason codes: 1 — Defective 2 — Damaged 3 — Wrong size 4 — Wrong item 5 — Other