

Retail Womens Suits - Return Form

Name(Please Print)* _____ Date*: _____

Invoice Number: # _____ Last 4 Digits of Card Used: _____

Address* _____ Town*: _____

State and Zipcode*: _____ Phone Number*: () - -

Style number and information of returned item(s):

#1: Style: _____ Color: _____ Size: _____ Amount: _____

#2: Style: _____ Color: _____ Size: _____ Amount: _____

Reason for return (Check One)

Doesn't Fit Wrong Style Sent Received Too Late

Other: _____

What would you like to do with the return? (Check One)

Exchange for another style(s) as listed below

#1 Style: _____ Color: _____ Size: _____

#2 Style: _____ Color: _____ Size: _____

Refund Back to Original Payment Method With a 25% Restocking Fee

Hold as a Store Credit good for one year after received date for full amount

Thank you for shopping with Retail Womens Suits!
Please remember to attach the tracking number (on receipt) to this form or
Or email your tracking number and name to:
fashionreturns@yahoo.com