|  |  |  |  |
| --- | --- | --- | --- |
| YOUR NAME: |  | DATE OF ORDER OR PURCHASE: |  |
| STREET ADDRESS: |  | ORDER OR TRANSACTION NO. |  |
|  | QTY: |  | STATE: |  | POSTCODE: |  | PAYMENT METHOD USED: |  |
|  |  |  |  |  |  |  |  |  |

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| --- |
| **PLEASE FILL OUT THE DETAIL FOR EACH ITEM AS WELL AS IS POSSIBLE** |
|  | Style No. | SKU | Description | Color | Size | Return Code / Comment |
| **1** |  |  |  |  |  |  |
| **2** |  |  |  |  |  |  |
| **3** |  |  |  |  |  |  |
| **4** |  |  |  |  |  |  |
| **5** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

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| **FIVE STEPS TO RETURN MERCHANDISE** |
| 1. CHECK THE BOX ABOVE OF ANY ITEM YOU MAY HAVE ELECTED TO RETURN.
 | **4.** IF THE ITEM WAS PURCHASED AS A GIFT, WHO IS TO RECEIVE THE EXCHANGE / CREDIT? | **5.** INCLUDE THIS FORM WITH ANY ITEM(S) YOU ARE RETURNING VIA PARCEL POST OR OTHER MAJOR CARRIER (NO C.O.D.) TO THE FOLLOWING ADDRESS:PAUL START NEW YORKMADISON AVENUE AT 45TH STREETNEW YORK, NY 10017TELEPHONE: (515) 456 1234EMAIL: [ENTER EMAIL ADDRESS HERE] |
| 1. ENTER ONE OF THE BELOW CODES TO EXPLAIN THE REASON FOR YOUR RETURN (PLEASE ALSO COMMENT AS APPROPRIATE):
 | NAME: |  |
| ADDRESS: |  |
| 1 – SIZE2 – COLOR3 – QUALITY | 4 – NOT WHAT WAS EXPECTED / DESIRED.5 – OTHER |  |  |
|  |
|  |
| 1. PLEASE TELL US IN THE AREA BELOW WHAT WE CAN SEND TO YOU IN EXCHANGE OR REPLACEMENT.
 | PHONE NUMBER: | (515) 123-4567 |
| **Please tell us what exchange(s) or new item(s) you would like us to send to you** |
|  | **Style Number** | **Description** | **Color** | **Size** | **Price** |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| Merchandise returned WITHIN 14 Days will be refunded in the same manner in which it was purchased. Returns made AFTER 14 Days and ALL Sale Merchandise will only be considered for a merchandise credit. |

**Packing Slip / Return Form**