



Return to: Attn: Return Dept. 5525 Wilshire Blvd., Los Angeles, CA 90036
Toll Free: 1. 800.421.4417 Tel. 323.931.1021 Fax. 323.931.5058

EXCHANGE / RETURN FORM

Please use this form for an exchange or return item(s). You must send the copy/original invoice with the return item(s). (Note: Returns are for human hair extensions in original condition only.)

Return item(s) for:

exchange in-store credit refund w/ 15% service charge

Name: _____

Customer#: _____

Address: _____

Invoice#: _____

RA#: _____

Daytime tel: () _____

* RA# is required for refunds only.

E-mail add.: _____

For exchange customers only:

Your shipping add.:

(If different from above)

Please list exchange item(s):

<u>item(name or code)</u>	<u>color</u>	<u>length</u>	<u>quantity</u>	<u>price</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

UPS: Overnight 2nd-Day 3rd-Day Ground

Post Office: Express Airmail

(P.O.Box add.& military add.)

Payment Method: Please specify how you want to pay the difference and/or shipping charges.

Check or Money Order enclosed COD (Collect on Delivery)
(extra \$9.00 c.o.d. fee will be added)

Credit Card # _____ Exp. Date ____/____/____ CVV # _____