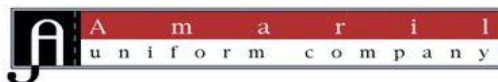


Save document to computer before you begin typing.



## Return/Exchange Authorization Request Form

Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Company Name: \_\_\_\_\_ Location: \_\_\_\_\_  
Employee Name: \_\_\_\_\_ Supervisor Name: \_\_\_\_\_  
Supervisor Signature: \_\_\_\_\_ Supervisor Email\*: \_\_\_\_\_

**The customer is responsible** for all return shipping costs (in and out) IF it is due to incorrect ordering on sizes, colors or choice changes. **Amaril Uniform Company is responsible** for all return shipping costs (in and out) on items **we have shipped incorrectly**. Items may not be returned or exchanged if they have been **laundered, tags have been removed, or have custom embroidery or specialization**.

**\*Note:** Some of our customers do not have the means to produce a UPS return label. You may request Amaril Uniform to make one for you and email it out to you if you cannot provide one. The **Returned Shipping Costs (in and out)** will be billed to your exchanged or deducted from your credit. *\*The UPS return tag will be emailed to manager email above.*

Return:\_\_\_\_ Exchange:\_\_\_\_ Do you need a UPS return tag\*? \_\_\_\_\_

Original Invoice Number: IV \_\_\_\_\_

Reason for return/Exchange? \_\_\_\_\_

### Return Items:

Style Number	Brand	Color	Size	Quantity

If **returning** only, do you prefer:

\_\_\_\_ Account credit      \_\_\_\_ Reimbursement to Credit Card      \_\_\_\_ Other

If **exchanging**, please fill out the following:

### Exchange items:

Style Number	Brand	Color	Size	Quantity