



S H E L F R E L I A N C E ®

RETURN/EXCHANGE FORM

Please review our retruns/exchange policy at <http://www.shelfreliance.com/shipping-and-returns>. An original order number and a return merchandise number (RMA) are mandatory. Please call customer service at 1-877-743-5373 to obtain your RMA number.

Customer Name _____ Return Date _____

Order # _____ RMA # _____

Phone # _____ Email address _____

I am returning the following items:

ITEM (including size)	QTY	PRICE	TOTAL	Office Use Only:	
				Received	Damaged

(Please note additional items on second page)

Total Credit: _____

Reason For Return: _____

I would like a(n):

REFUND

EXCHANGE

For an exchange, please indicate the items you wish to receive in exchange:

ITEM (including size)	QTY	PRICE	TOTAL

Total Charge: _____

Shipping: _____

Total of Credits and Charges: _____

A refund or charge may be issued to the card used to place the original order. If we are unable to charge or refund this card, you will be contacted.

Cardholder Signature* _____

**By signing above, I agree my credit card will be charged or refunded for the appropriate amount according to my cardholder agreement.*

Send To:

Shelf Reliance
ATTN: Returns
630 E 1306 S
American Fork UT 84003

FOR OFFICE USE ONLY:

Date Received:	Date Processed:	Employee Initials:
Notes:		



SHELF RELIANCE®

I am returning the following items (continued):

ITEM (including size)	QTY	PRICE	TOTAL	Office Use Only:	
				Received	Damaged

Total Credit: _____