

Uniform Country Return/Exchange Form

____ / ____ / ____
Month / Day / Year

Billing Info Same as front

Last Name | First Name | Middle Initial

Street

City | State | Zip

Ship To Same as Billing

Last Name | First Name | Middle Initial

Street

City | State | Zip

Item#	Qty	Item Description	Size	Exchange	Return	Price
				<input type="checkbox"/>	<input type="checkbox"/>	\$
				<input type="checkbox"/>	<input type="checkbox"/>	\$
				<input type="checkbox"/>	<input type="checkbox"/>	\$
				<input type="checkbox"/>	<input type="checkbox"/>	\$
				<input type="checkbox"/>	<input type="checkbox"/>	\$
				<input type="checkbox"/>	<input type="checkbox"/>	\$

Enter your items for exchange or new items below

Total Returns

Item#	Qty	Description	Size	Color	Price
					\$
					\$
					\$
					\$
					\$
					\$

WE DO NOT CHARGE FOR SHIPPING TO SEND EXCHANGES BACK TO YOU

Credit Card Info (only if new total exceeds returns)

Last Name	First Name	Middle Initial
Credit Card #		Exp Date
Signature		CVV#

Total Purchases

Total Returns

Balance to credit card



USE CARD FROM ORIGINAL PURCHASE

Questions or Suggestions are always welcome _____

Returns can be made within **30** days of purchase, after 30 days a store credit will be given up to 60 days from date of purchase. Items must have original tags and must not have been laundered. Enclose this form with the packing slip on back side to
Uniform Country • 6535 Commonwealth Dr • Roanoke VA 24018 • 800-880-7336