

RALEIGH, NC 27615-8416

| From: | | | | | | | | |
|--|---------------|-----------------|--------|------|--|------------------------------|--|--|
| NAME | | | | | Return To: | | J HARLEN COMPANY 2811 VAN HURON DRIVE | |
| ADDR | | | | | | | | |
| CITY | | | | | RALEIGH, NC 27615-8416 | | | |
| STATE ZIP | | | | | | | 1-888-878-5480 | |
| PHON | <u>E</u> | | | | | | | |
| | | | | | | | | |
| INVOICE NUMBER | | DA | DATE | | SHIPPED BY | | | |
| | | | | | | | | |
| | | | | | | | 1 | |
| How T | o Return an C | order: | | | | Rass | son Codes | |
| Return this completed form with your order. | | | | | A. No longer need the item. | | | |
| Items must be new & unused in the original box | | | | | B. The item is defective or missing parts. | | | |
| All returns must be sent prepaid. If we shipped the wrong part we will C. I am not happy with the quality of this item | | | | | | | | |
| reimburse you for the shipping cost. D. Item is not what I ordered. | | | | | | | | |
| Insure the return part for full value to protect yourself against loss. E. I ordered the wrong item. | | | | | | | | |
| Thor authorization required for all freight returns. | | | | | | | ther; Please explain reason. | |
| Buyer is responsible for replacement freight charges on exchanges. | | | | | | | | |
| | | | | | | | | |
| Part I Want to I Want a Reason | | | | | | EVDI ANIATIONI | | |
| QTY | Number | EXCHANGE | REFUND | Code | | EXPLANATION | | |
| 1 | Example | Х | | Е | | Ordered Size 10 Need Size 11 | | |
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| Notes or special instructions: | | | | | | | | |
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| Cut out the shipping label and attach to the outside of the carton with clear tape. | | | | | | | | |
| From: | | | | | | | | |
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| <u> </u> | | | | | | | | |
| To: | | | | | | | | |
| J HARLEN COMPANY | | | | | | | | |
| | | | | | | | | |
| 2811 VAN HURON DRIVE | | | | | | | | |