

FOOTWEAR OUTFITTERS RETURN FORM

1 YOUR NAME: _____

2 YOUR SHIPPING ADDRESS:

(Exchanges only)

3 PURCHASE DATE AND/OR INVOICE # _____

4 MERCHANDISE WAS:

_____ Purchased by me

_____ Someone else (Name) _____

5 REASON FOR RETURN OR EXCHANGE:

_____ Incorrect Fit

_____ Defective

_____ Received Wrong Item

_____ Damaged

_____ Did not arrive on time

_____ Other _____

6 ACTION TO BE TAKEN: (See notes at end of this section for additional details)

_____ REFUND- A refund minus any original shipping charges and/or processing fees will be refunded

_____ EXCHANGE- Please mark the fields below with your request!

The appropriate charge or refund will occur depending on items to be exchanged. We will do a one time exchange on any item FREE of charge.

* You, the customer, are responsible for the return shipping.

* Our Ground Shipping rate will be charged on additional exchanges

Note: We process exchanges as quickly as we can- if you need expedited service, we offer it on this form, however you may want to place a new order and let us refund your original order to avoid confusion (processing doesn't always occur immediately)

MULTIPLE ITEMS to exchange, please checkmark here and feel free to write on the back of this form

Item to be returned: _____ Size: _____ Price: _____

New item requested: _____ Size: _____ Price: _____

Please mark the shipping type you would like us to use for your exchange:

_____ Ground (Free)

_____ 3-Day Air (\$35.99)

_____ 2nd Day Air (\$52.99)

_____ Next Day Air (\$68.99)

*** For Air Shipments
see note above!**

TOTAL AMOUNT OR REFUND FOR EXCHANGE _____

NOTES:

* If your exchange items are more expensive, simply enclose a check or provide us with credit card information below. If it is less expensive, we will issue a refund.

* Manner for refunds is determined by the payment type used on the original purchase.

For more mail order return policy details see visit www.footwearoutfitters.net/RW>Returns

7 PAYMENT INFORMATION:

_____ Use card from original purchase- PLEASE verify last 4 digits: _____

_____ New Credit Card # _____ Expiration Date: _____

NAME ON CARD _____ SIGNATURE: _____

Cut on dotted line and affix to the package you are returning

FROM

FOOTWEAR OUTFITTERS
Returns and Exchanges
3202 South 25 East (Hitt Road)
Idaho Falls, ID 83404