

RETURN ORDER FORM

Chloe Shaniece Boutique
4132 Atlanta Highway
Ste 110-321
Loganville, GA 30052

support@chloeshaniece.com
www.chloeshaniece.com

Reason Codes
[1] Did not fit
[2] Do not like
[3] Incorrect Item
[4] Item damaged
[5] Other (please indicate)

STEP 1

PROVIDE PURCHASE AND PURCHASER INFO

NAME		ORDER NO. if known
BUS. NAME if applicable		
STREET ADDRESS		ORDER DATE if known
CITY / STATE / ZIP		
EMAIL		DELIVERY DATE if known
PHONE		

STEP 2

RETURN ITEM AND REASON

ITEM NAME	REASON FOR RETURN	QTY	PRICE

STEP 3

PROVIDE ADDITIONAL COMMENTS optional

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