



return form

original transaction date: _____ *order#:* _____

date of return: _____

address: _____

city: _____ *state:* _____ *zip:* _____

phone: _____ *e-mail:* _____

reason for return: (please check all that apply) _____

defective *damaged* *wrong size* *wrong item* *other*

item sku: _____ *quantity:* _____ *unit price:* _____ *total price:* _____

description: _____

please mail merchandise and return form to:

pure and little
p.o. box 4625
warren, new jersey
07059

o: 908.647.5001 | f: 908.647.5199 | p.o. box 4625 | warren, new jersey 07059