

Haband Returns & Exchanges Form

Please fill in the applicable information below and enclose in your return package.

Order #:	Customer #:
Purchased by:	Send Refund/Exchange To: (if different from left)
Name: _____	Name: _____
Address: _____ _____	Address: _____ _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____
Phone: (____) _____ Phone: (____) _____ <small>Daytime Evening</small>	Phone: (____) _____ Phone: (____) _____ <small>Daytime Evening</small>
Email: _____	Email: _____

For Returns: See [Return Policy](#) for details. Please enter a reason code from the list below for each item you are returning.

Product #	Color	Size	Qty	Reason Code

For Exchanges/New Orders: Check the appropriate box >

Exchange New Order

Product #	Color #	Size	Length	Qty

Return Reason Codes: Enter the appropriate code above

Service		Fit Too Small		Shoes		General		Fit Too Large		Quality		Style	
405	Not Size Ordered	305	Chest/Bust	205	Too Long	1	Changed My Mind	505	Chest/Bust	105	Fabric/Material	605	Don't Like Color
410	Not Color Ordered	315	Waist	210	Too Short	2	Item Not As Expected	515	Waist	110	Workmanship	610	Don't Like Style
415	Not Item Ordered	320	Length	215	Too Narrow	3	Value Not As Expected	520	Length	115	Defective Garment		
420	Arrived Late	330	Seat	220	Too Wide	4	Appearance	530	Seat	120	Defective Zipper/Fastener		
425	Damaged in Transit	340	Everywhere	235	Toe Too Tight	5	Ordered Wrong Size	540	Everywhere				