



RETURN & EXCHANGE FORM

YOUR INFO:

Order/Invoice Number: _____

Name on Order: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail Address used for order: _____

*ANY RETURNS RECEIVED LATE (30 DAYS FROM RECEIVING ITEMS) WILL INCUR AN \$8 PER ITEM LATE RETURN FEE ON THE CREDIT AMOUNT.***PLEASE WRITE IN THESE BOXES BELOW ALL THE ITEMS YOU ARE RETURNING.**

Kosher Casual Style # (4 Digits)	Size	Color	Description	Price	Reason for Return
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What are you needing? Please tick one that applies to you from the following:

refund only_

Exchange Only_

Partial refund and exchange_

Other(please specify)_

If you want an EXCHANGE , please write in these boxes below all the items you would like us to send out to you.

(New shipping fees will be incurred)

Kosher Casual Style #(4 Digits)	New Size	New Color	Description	Price
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Return item/s to either address:

Kosher Casual
 c/o RL Return Center
 840 N. 10th Street
 Suite E
 Sacramento
 CA, 95811
 United States

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Kosher Casual
 4 Rechov Hauman
 North Industrial Zone
 Bet Shemesh 9906104
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