



Herbalife International of America, Inc. (310) 410-9600

lifemana.com 5317 94th Street - Elmhurst, NY 11373

ORDER DEPARTMENT
Mon.-Fri. 5:00am - 7:00pm Sat. 6:00am - 2:00pm (PST)
Tel.: (310) 216-7770 Fax: (310) 216-5160

DISTRIBUTOR RELATIONS
Tel.: (310) 216-9661

CUSTOMER REQUEST FOR REFUND FORM

Mail to your nearest Herbalife Distribution Center.

Date: _____

Customer:
Name: _____
Address: _____
City: _____
State: _____
Zip Code: _____ Telephone: _____

Ship to:
Name: _____
Address: _____
City: _____
State: _____
Zip Code: _____ Telephone: _____

Refund Information:
I request refund for purchase price of _____
in the amount of \$ _____
For the following reasons: _____
Refund acknowledged in the amount of: \$ _____

Distributor:
Name: _____
Herbalife ID Number: [] [] [] [] [] [] [] [] [] []

I herewith return the unused portion (3/4 1/2 1/4) of the product along with my receipt/copy of the retail order form to the Distributor for return to the Company as required under the 30-Day Money-Back Gurantee after trying the product for: 1 week or less; 2 weeks; 3 weeks; 4 weeks.

Customer Signature: _____ < Sign Here

THIS FORM IS NOT VALID WITHOUT A COPY OF THE RETAIL ORDER FORM/INVOICE.
This form will help us to make an audit of your customers by calling them to see exactly what some of the problems have been. This will help us find out what we can do as a company to further help our customers, our company growth, and most of all you, the Distributor, to better service your customers in the field and to build a bigger and better repeat business for your future.

TO HERBALIFE
I certify that I have refunded the above stated amount to customer. Unused portion of the product: 3/4 1/2 1/4 and customer's copy of retail sale/copy of retail order form is hereby returned for replacement in kind.
Distributor Signature: _____ Date: _____

NOTICE TO THE DISTRIBUTOR
This form must be completely and properly filled out and signed, and returned together with the unused portion of the product, along with customer's receipt/copy retail order form, to the Distributor Center within thirty (30) days following refund to customer.

DISTRIBUTION CENTER RECEIPT
Unused portion of product and customer's retail receipt/copy of retail order form have been received by the distribution center within thirty (30) days following refund to customer and product has been replaced in kind.

DESCRIPTION OF PRODUCT

SHIPPED BY

PICKED UP

Warehouse Clerk: _____ Date: _____

30 DAY MONEY-BACK GUARANTEE

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