

Return Form



Return Form

TODAY'S DATE / /			
First / Last Name :			
Contact Number:			
Order No# / Ref No#:			
Return For Refund _____			
Return For Store Credit _____			
QTY	ITEM CODE	Reason For Returning	Color/Size:

Return Address:

S.L Return Department

1705 E. Grevillea Ct. Ontario, CA 91761. USA