Fully Lined Church Suits - Return Form

Name(Please Print)*		Date*: Last 4 Digits of Card Used:		
Invoice Number: #				
Address*		Town*:		
State and Zipcode*:		Phone Nu	Phone Number*:()	
Style number and inform	nation of returned	item(s):		
#1: Style:	Color:	Size:	Amount:	-
#2: Style:	Color:	Size:	Amount:	
Other: What would you like to				
Exchange for another s		.		
#1 Style:			<u> </u>	
#2 Style:	Color:	Size:		
Refund Back to Origina	l Payment Method	With a 25% Rest	ocking Fee	

Thank you for shopping with Fully Lined Church Suits!

Please remember to attach the tracking number (on receipt) to this form or

Or email your tracking number and name to:

Hold as a Store Credit good for one year after received date for full amount

fashionreturns@yahoo.com