

## **Request for Return**

Please return by fax: **416-665-6897** (Local) **1-800-587-2339** (Long Distance)

- Safecross will not accept or credit your account until a valid authorization number has been issued.
- This form will be returned to you within 10 working days (2 weeks) with either a valid authorization number or a denial for return.
- This form and a copy of the original invoice(s) must accompany your return shipment.

## \*\*ALL RETURNS ARE FREIGHT PREPAID BY SENDER\*\*

- \*\* If the error was made at Safecross we will advise the method of shipping on the return confirmation.
- Any items damaged in transit are the responsibility of the Sender and will not be credited.
- Please see pg. 2 of your distributor price list in the general terms and conditions section for Safecross' return goods policy.
- A re-stocking fee of 15% (minimum \$15.00) applies to all returned goods.
- All returns must be delivered back to Safecross First Aid Ltd. within 30 days of authorization being issued – otherwise return will not be accepted, and a credit will not be issued.

## \*\*DO NOT RETURN UNLESS YOU RECEIVE A VALID RETURN AUTHORIZATION NUMBER\*\*

Safecross will <u>NOT</u> accept any products with labels or any other markings on the packaging. All items that are not in saleable condition will be returned without credit.

	DO NOT FILL IN
Date:	Return Number:
Customer Number:	Contact Person:
Customer Name:	
Full Address:	
Telephone #:	Facsimile #:

Item #	Full Product Description	Qty	Cost	Invoice Number	Invoice Date	Reason For Return Please explain for each item	Exp. Date (if applicable)	Yes/ No
	Item#	Item # Full Product Description	Item# Full Product Description Qty	Item # Full Product Description Qty Cost				