



**RETURN MERCHANDISE
AUTHORIZATION
RMA REQUEST FORM**

Please Print Clearly...

STORE NAME: _____

STORE ADDRESS: _____ STORE

CITY: _____ STATE _____

STORE PHONE: _____

STORE FAX: _____

OWNER / BUYER NAME: _____

DATE _____

RMA # _____

EXPIRATION DATE _____

Select one of the following:

- REPLACEMENT EXCHANGE
 DAMAGED RETURN FOR CREDIT

INVOICE # _____ INVOICE DATE _____

STYLE # _____

REASON FOR RETURN / EXCHANGE:

SPECIAL INSTRUCTIONS:

Please give a complete description of the problem to assist us in exchanging / replacing your product.

NO FAULT FOUND: Products returned as damaged / defective, but found to have no problems may incur a **NO FAULT FOUND FEE**. Fee is \$50.00 Dollars

SHIPPING: All returns must be shipped freight and insurance prepaid. Items that are freight collect will not be accepted. Damage or loss of goods during shipment is the customer's responsibility. Please carefully package your return merchandise. Replaced products will be shipped freight free via UPS ground delivery. Air or overnight shipping costs is the responsibility of the customer.

NOTE: All products must be returned complete in original condition and packaging. Write the RMA number on the outer box or the shipping label. Suits America will charge if you do not meet the above conditions, a minimum 20% restock fee to cover labor, processing and shipping costs.

Suits America
2050 E 15th st, Los Angeles, CA 90021
Phone: 1-213-745-2900 / Fax: 1-213-745-2904