



Return-Exchange Form

Order # _____
Name _____
Address _____
City _____
State, Zip _____
Daytime phone _____
Email address _____

Item returned	Size	Reason for return

Request refund (Refund will be made to original form of payment)

Request exchange (Fill out grid below)

Item requested	Size	Any special requests?

Send all Returns/Exchanges to:
Sherman Brothers
Returns/Exchanges
1012 N. Bethlehem Pike
Suite 200
Ambler, PA 19002