

Tolani Return Authorization Form

Please complete all sections of this form and fax the completed form to 858-381-5530 or email to orders@tolanicollection.com. Once the completed form is received a RA# and UPS call tag will be assigned to the form and sent back to you. Please **include a copy of this form with RA#** when sending back the merchandise.

Tolani
1621 S. Rancho Santa Fe Rd Ste B
San Marcos, CA 92078

Customer Details

Company _____	Contact _____	Email _____
Address _____	Phone _____	Fax _____
City _____	State _____	Zip _____

Product Details

Item	Color	Size	Qty	Reason for Return	Invoice #	Date

Please note: We will not process any returns without an RA#. Upon receipt of the goods, we will inspect them and make a determination regarding the amount of refund. The refunds can be as follows:

- * Full refund for requests submitted within 7 days of receipt of goods due to manufacturing defects or shipping errors by Tolani
- * Refund after applying restocking fee
- * No refund

ALL TOLANI CREDIT MEMOS WILL BE APPLIED TOWARDS REPLACEMENTS OR FUTURE SHIPMENTS ONLY

FOR INTERNAL USE ONLY

RA# _____ AUTHORIZED BY _____ DATE _____