

# RETURN FORM



PLEASE ENTER ALL THE INFORMATION BELOW SO THAT WE MAY PROCESS YOUR RETURN IN A TIMELY MANNER.

If information is missing or incorrect, it may delay the return process.

## Customer INFORMATION

NAME: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

## REASON FOR RETURN

- REFUND (within 30 days)
- STORE CREDIT
- REPLACEMENT CREATED (I have spoken to a rep.)

## Order INFORMATION

CUSTOMER PO#: \_\_\_\_\_

ORIGINAL SHIPPING ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_

## PLEASE RETURN TO:

ATTN: RETURNS  
Stephen David Leonard  
3501 W Segerstrom Ave  
Santa Ana, CA 92704

CONTACT US  
(844) 913-7353/  
[info@stephendavidleonard.com](mailto:info@stephendavidleonard.com)

WE VALUE YOUR FEEDBACK! PLEASE GIVE A CLEAR AND DETAILED EXPLANATION OF THE REASON FOR RETURN.