

B'S KNEES
FRAGRANCE CO.



RETURN AUTHORIZATION REQUEST FORM

Order #:

Order Date:

Name:

Billing Address:

Shipping Address:

(Leave blank if same as billing)

Phone:

Email:

What are you requesting? (circle one)

- Replacement - - Refund -

Returns are credited in the original form of payment. For replacements you will receive the same item in the event of a defect. Please visit BsKneesFragranceCo.com/Shipping-and-Orders

Reason for Return:

Item(s):

Additional Information:

Please print this form and return with your item(s) to the following address:

B's Knees Fragrance Co.
2323 Executive Drive
Garland, TX 75041