



**BEULAH**  
STYLE

# Return Form

Date: \_\_\_\_\_

Invoice #: \_\_\_\_\_

## Customer Information:

Billing Info:

Shipping Info: (Only if it is different from Billing info)

Name

Name

Address

Address

City

State

Zip

City

State

Zip

Email

Email

Phone

Phone

## Return Item(s)

Qty	Item #	Description	size	Price

## Check The Reason for the Return:

Wrong item(s) shipped\*

Do not like it

Item(s) damaged

Other : \_\_\_\_\_

**Shipping cost is not refundable\*\***

Ship the package to:

**Beulah Style**  
1031 Towne Ave  
Los Angeles, CA 90021  
T. 213-746-5566  
F. 213-746-5567