

# MIG

SEED TO SKIN • SKIN TO SOUL

## Return/Exchange Form

MIG  
13784 Gleneagle Drive  
Colorado Springs, CO 80921

**Please fill out the following information in full and include with your return/exchange.**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Order #: \_\_\_\_\_

Email Address: \_\_\_\_\_

I would like to receive a: (please choose one)

Refund

Exchange for: \_\_\_\_\_ Qty: \_\_\_\_\_

Reason for return/exchange: \_\_\_\_\_

---

---

---

---

---