

RETURN FORM**Customer information:** [Please print clearly]**Order #:** _____ **Order Date:** _____**Name:** _____ **Tel No:** _____**Address:** _____**City:** _____ **State:** _____ **Zip/Postcode:** _____**E-mail Address:** _____**Please list contents and quantity below:**

Qty	Item Number	Description	Reason for Return*

Reason for Return: Wrong item received Wrong item ordered Does not want Damaged in shipping Defective Other**Comments:** _____

Once this form is completed, pack it with the item you are returning.

Send to:
Luv Lou Returns
PO Box 7217
Alexandria NSW 2015
Australia