

JESTER JEWELERS 15 DAY RETURN POLICY

Customer satisfaction is top priority at Jester Jewelers. If you are not satisfied with your purchase, returns may be made within 15 days of the purchase date. Item must NOT be worn, damaged or altered in any way. Personalized and custom pieces are not eligible for return and considered final sale. If the item is in its original condition, your refund will be issued less any less any shipping and handling charges.

15 DAY RETURN POLICY TERMS & CONDITIONS

- Any return item(s) must be received within 15 days from the original shipping date.
- Any return item(s) require a completed Return Code (obtained from Jester Jewelers) and Return Form.
- Any return item(s) must be shipped and insured according to our procedures.
- Any return item(s) must be returned in their original condition.
- Any return item(s) must be without alterations or signs a wear.
- Any custom orders or special orders are subject to non refundable costs.
- Any custom service or special service such as engraving, are subject to non refundable costs
- Any damaged item(s) will be subject to non refundable cost.
- Any missing content(s) are subject to replacement fees.
- Any missing certificate(s) and/or appraisal(s) are subject to replacement fees.
- Any improperly packaged return item(s) and/or uninsured return item(s) will not be accepted.

RETURN INSTRUCTIONS

1. Email us at info@arjester.com or call 513-241-1465 or 800-543-7371 for a Return Authorization Form.
2. Complete the Return Authorization Form and enclose with the returned item(s). Item must be in original packaging/box in proper packaging with a copy of the Invoice or Sales Order.
3. Package item(s) for shipping and send to:
RETURNS
JESTER JEWELERS
6781 HARRISON AVENUE
CINCINNATI, OH 45247
4. Item(s) must be properly packaged, fully insured and require delivery confirmation signature. Jester Jewelers is not responsible for lost or damaged return shipments. TERMS & CONDITIONS APPLY.
5. Once your item is received in its original condition, we will contact you to confirm your refund amount.

RETURN AUTHORIZATION FORM

Billing Contact Information

Name: _____
Address: _____
City, State, Zip: _____
Home Phone: _____
Work Phone: _____
Cell Phone: _____
Email: _____

Shipping Contact Information (if different from billing information)

Name: _____
Address: _____
City, State, Zip: _____
Home Phone: _____
Work Phone: _____
Cell Phone: _____
Email: _____

Reason for return: _____

Refund type: Store Credit OR Original Form of Payment (Cash will be refunded by check. We will contact you with refund amount before issuing refund.)

Name on card: _____

Expiration Date: _____

Signature _____

Date _____