



Return and Exchange Form

Customer Service (US ONLY) (973)768-2485

www.livelifeorganics.com

Billing Address

Name _____
 Address _____
 City, State, Zip _____
 Daytime Phone Number _____
 Email _____
 Original Order Number _____

Shipping Address (if different)

Name _____
 Address _____
 City, State, Zip _____
 Daytime Phone Number _____

Method of Payment

If the total of your exchanges or new order exceeds the value of your return, please provide method of payment. Credit Cards ONLY. We do not accept checks, money orders or cash.

American Express Mastercard Discover Visa

Card No. _____ Name on Card _____ Exp. Dt. _____

Items Being Returned

Item #	Quantity	Description	Size	Color	Price

Exchange for the Following Items

Item #	Quantity	Description	Size	Color	Price

Notes _____

