



# Merchandise Return and Order Form

Return to: New U Life Corporation, 2627 Pleasant Hill Rd., Pleasant Hill, CA 94523

Complete and return this form with merchandise. Send insured and postage-paid. We will refuse returned packages sent COD. We will refund shipping cost if we made an error or your product was defective.

All claims must be submitted within 60 days of receiving your order. If you need assistance please call 1-844-510-6398.

## CUSTOMER INFORMATION

Name:		Daytime Phone:		Evening Phone:	
Address:		City:	State:	Zip:	Country:
Distributor/Customer#			Order #		

## LIST OF ITEMS RETURNED

Reason Code	Item Number	Quantity	Description of Item	Size	Price



\*To speed up your return, we ask that you provide the reason for your return by placing one of the following codes in the left column indicated by the arrow

- |  |   |                               |
|--|---|-------------------------------|
| <b>RBO</b> Backorder received too late | <b>RNP</b> Not as pictured or described (Explain below) | <b>RWS</b> Wrong Size         |
| <b>RDA</b> Damaged                     | <b>RDQ</b> Disappointed in quality (Explain below)      | <b>RCH</b> Changed my mind    |
| <b>RDE</b> Defective (Explain below)   | <b>ROW</b> Ordered wrong size                           | <b>RWI</b> Wrong item shipped |
| <b>RNO</b> Item not ordered            | <b>ROT</b> Other (Explain Below)                        | <b>COD</b> COD Refused        |

Explanation:

Re-order items below

Refund

Item Number	Quantity	Description (Items you want to reorder)	Size	Price