

**--- UNIFORM RETURN FORM ---**

**TRIPLE STITCH**

115 Waterbury Road  
Prospect, CT 06712

**ATTENTION:** Dianne  
203-758-6303

**DATE** \_\_\_\_\_

**TECH NAME** \_\_\_\_\_ **ADDRESS** \_\_\_\_\_

**TECH EMAIL ADDRESS** \_\_\_\_\_

**ITEM(S) BEING RETURNED** \_\_\_\_\_ **NO OF ITEMS** \_\_\_\_\_

**REASON** \_\_\_\_\_

**EXCHANGE FOR:** *(please check one)*

**SIZE**

**NEW ITEM:**    **SIZE** \_\_\_\_\_

**COLOR:** \_\_\_\_\_

**DESCRIPTION** \_\_\_\_\_

\_\_\_\_\_

**SHIP TO ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SPECIAL INSTRUCTIONS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Please include this Return Form in your package*