



## Return Merchandise Authorization Form

Date:

Business Name:

Contact Name:

Address:

City, State, Zip:

Telephone:

Facsimile:

E-mail:

Customer Purchase Order #:

Via Motif Sales Order #:

Via Motif Invoice #:

Item #	Description	Color	Qty	Reason for Return
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Date:

Return Merchandise Authorization #:

Please fax completed Return Merchandise Authorization Form to Via Motif's Customer Service Department at 305-374-4485. Via Motif's Customer Service Department will return this form with the Return Merchandise Authorization Number for reference purposes.