



PLEASE INCLUDE THIS FORM WITH YOUR RETURN

**ROS HOMMERSON RETURN POLICY**

We want you to be completely satisfied with your purchase. Simply return any unworn and unaltered item within 30 days for an exchange or refund.

Shipping charges are not refundable unless we made an error in your shipment.

Please test your new shoes on a carpeted surface. Shoes that are worn or scuffed are not returnable.

If you wish to return your shoes, please fill out this form and return it with your shoes. Packages must be returned freight prepaid. We cannot accept C.O.D. deliveries.

Please note: Posting of credit card refunds on your statement will be dependent upon your billing cycle.

**1. PLEASE PRINT**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

**2. WHAT WOULD YOU LIKE US TO DO?**

- Please send the exchange shown below.  
**Ros Hommerson will pay freight to reship the item.**
- Please issue a refund for the returned merchandise less shipping and handling.

**3. DETAILS OF RETURN** Please indicate in the table below what you are returning. Use the Reason Codes listed to indicate why you are returning the item(s).

Qty.	Style #	Color	Size	Product Name	Reason Code	Price

**Reason Codes:** A. Shoe Too Short C. Shoe Too Narrow F. Item Defective (please specify below)  
B. Shoe Too Long D. Shoe Too Wide G. Other (please specify below)

Comments: \_\_\_\_\_

**4. TO EXCHANGE ITEMS OR PLACE NEW ORDERS, PLEASE COMPLETE THE FOLLOWING:**

Qty.	Style #	Color	Size	Product Name	Unit Price	Total

**5. IF THE EXCHANGE RESULTS IN A PAYMENT DUE, PLEASE ENCLOSE A CHECK, COMPLETE THE FOLLOWING CREDIT CARD INFORMATION, OR CONTACT CUSTOMER SERVICE AT 800-837-3739.**

Type of Card  Visa Debit/Credit Card # \_\_\_\_\_  
 Credit  MasterCard  
 Debit  American Express Exp. Date \_\_\_\_\_ Card Code \_\_\_\_\_  
 Discover  
Signature \_\_\_\_\_

**ANY QUESTIONS?**

PLEASE CALL US TOLL FREE: **1-800-837-3739** OR E-MAIL US AT: [RosCustomerService@RosHommerson.com](mailto:RosCustomerService@RosHommerson.com)

Cut along the dotted line and affix to the package you are returning

FROM: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Ros Hommerson**  
**Attn: Returns Department**  
**252 Quarry Road**  
**Lancaster, OH 43130**