

A1 SCRUBS, INC. Return/Exchange Form

Please print and mail your scrubs and this form to:

**A1 SCRUBS, INC. R/E DEPT.
12261 Bobwhite Rd
Gretna, NE 68028**

Your full name: _____
 Phone w/ area code: _____
 Online order number: _____

CONDITIONS FOR ACCEPTABLE RETURNS AND/OR EXCHANGED UNIFORMS:

- 1) UNWASHED
- 2) UNWORN (tried on is ok)
- 3) ALL LABELS AND TAGS INTACT
- 4) FREE OF DEBRIS, HAIR, ETC.
- 5) UNDAMAGED
- 6) ORIGINAL PLASTIC PACKAGING (OPENED OKAY)

Please complete the return/exchange detail section below. If returning only, list items and write return to right of items.

What you received...

ITEM #:	COLOR/PRINT:	SIZE:	QTY:

What you would like in exchange...

ITEM #:	COLOR/PRINT:	SIZE:	QTY:

If you have more items to list, please use back of form

In a hurry?

Place your new order online now, then return your current order for a full refund within 30 days.

No returns on medical instruments, collegiate wear or embroidered garments

NO RETURNS WILL BE ACCEPTED AFTER 30 DAYS WITHOUT PRIOR CONSENT

Notes/Special Instruction:

This section for ordering additional items only:

ITEM #:	COLOR/PRINT:	SIZE:	PRICE:	QTY:	PRICE EXT.:
				X	
				X	
				X	
				X	
				X	
				X	
				X	
				X	
				X	

(Add \$1.50/2x-3x, \$2.50/4x-5x) Subtotal: _____
 Nebraska Residents - 7% sales tax: _____
 Shipping: \$4.95

Questions?
Call toll free: 866-217-2782
 M-F 9-5 CST

Payment method for additional item:

Grand total:

check one

Credit Card on file

Check enclosed

 Signature