

## REQUEST FOR RETURN

Please return by fax: **416-665-6897** (Local)  
**1-800-587-2339** (Toll Free Fax)

Safecross will not accept or credit your account until a valid authorization number has been issued.

This form will be returned to you within 10 working days (2 weeks) with either a valid authorization number or a denial for return.

This form and a copy of the original invoice(s) must accompany your return shipment.

### **\*\* ALL RETURNS ARE FREIGHT PREPAID BY SENDER \*\***

**\*\* If the error was made at Safecross we will advise the method of shipping on the return confirmation.**

- Any items damaged in transit are the responsibility of the Sender and will not be credited.
- Please see pg. 2 of your distributor price list in the general terms and conditions section for Safecross' return goods policy.
- A re-stocking fee of 15% (minimum \$15.00) applies to all returned goods.**
- All returns must be delivered back to Safecross First Aid Ltd. within 30 days of authorization being issued – otherwise return will not be accepted, and a credit will not be issued.**
- BACITRACIN PRODUCTS IN ALL FORMATS (CLASSIFIED AS A DRUG) AND FIRST AID KITS CONTAINING BACITRACIN PRODUCTS ARE NON-RETURNABLE/REFUNDABLE.**

**\*\* DO NOT RETURN UNLESS YOU RECEIVE A VALID RETURN AUTHORIZATION NUMBER \*\***

Safecross will NOT accept any products with labels or any other markings on the packaging.

All items that are not in saleable condition will be returned without credit.

Do Not Fill In

Return No.:

Date:	Customer No.:	Contact Person:
Customer Name:	T:	F:
Full Address:		

Item No.	Full Product Description	Qty	Cost	Invoice No.	Invoice Date	Reason For Return Please explain for each item	Expire Date (if applicable)	Yes/ No
1								
2								
3								