



Handwriting Without Tears®

RETURN POLICY

Your complete satisfaction is important to HWT. If you are not satisfied with your purchase, please return it to HWT within 90 days of ordering for a refund, credit, or exchange. Shipping/handling charges are not refundable. All items returned must be in unused, saleable condition. If your order is missing item(s) or has damaged item(s), please contact HWT Customer Service at 301.263.2700 or email customerservice@hwtears.com.

STEP 1	ORDER INFORMATION: Complete the following to assist us in accurately processing your return HWT Order/Invoice #: _____ PO #: _____ Customer Name: _____ Phone #: _____ Company: _____ Email: _____										
STEP 2	LIST THE ITEMS YOU ARE RETURNING BELOW or FOR MISSING ITEMS, SEE STEP 5: (additional items use separate page)										
	Code	Description									
		Quantity									
STEP 3	REASON FOR RETURN: (check appropriate box) <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> Damaged</td> <td><input type="checkbox"/> Wrong Item Sent</td> <td><input type="checkbox"/> Duplicate Item</td> </tr> <tr> <td><input type="checkbox"/> Wrong Item Ordered</td> <td><input type="checkbox"/> Too Many Sent</td> <td><input type="checkbox"/> Missing Item (see step 5)</td> </tr> <tr> <td><input type="checkbox"/> Other (explain) _____</td> <td></td> <td># of boxes I received _____</td> </tr> </table>		<input type="checkbox"/> Damaged	<input type="checkbox"/> Wrong Item Sent	<input type="checkbox"/> Duplicate Item	<input type="checkbox"/> Wrong Item Ordered	<input type="checkbox"/> Too Many Sent	<input type="checkbox"/> Missing Item (see step 5)	<input type="checkbox"/> Other (explain) _____		# of boxes I received _____
<input type="checkbox"/> Damaged	<input type="checkbox"/> Wrong Item Sent	<input type="checkbox"/> Duplicate Item									
<input type="checkbox"/> Wrong Item Ordered	<input type="checkbox"/> Too Many Sent	<input type="checkbox"/> Missing Item (see step 5)									
<input type="checkbox"/> Other (explain) _____		# of boxes I received _____									
STEP 4	COURSE OF ACTION: (check appropriate box) <ul style="list-style-type: none"> <input type="checkbox"/> Refund – processed based on original payment method; allow 4 weeks for processing <input type="checkbox"/> Credit <input type="checkbox"/> Send replacement of same item(s) that are being returned <input type="checkbox"/> Exchange for different items (see step 5) 										
STEP 5	EXCHANGE OF ITEM: LIST MISSING ITEMS OR NEW ITEMS YOU ARE REQUESTING (HWT Customer Service will contact you regarding any required payment)										
	Code	Description									
		Quantity									
STEP 6	RETURN SHIPPING: Please include this document and ship products by UPS or insured mail or by some other method that allows for tracking your shipment (C.O.D. shipments will be refused). Record tracking numbers below: <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-bottom: 1px solid black;">_____</td> <td style="width: 50%; border-bottom: 1px solid black;">_____</td> </tr> <tr> <td style="width: 50%; border-bottom: 1px solid black;">_____</td> <td style="width: 50%; border-bottom: 1px solid black;">_____</td> </tr> </table>		_____	_____	_____	_____					
_____	_____										
_____	_____										
	If you are shipping items back from one of the following states—ND, MT, WY, CO, NM, ID, UT, AZ, WA, OR, NV, CA, AK, HI—ship your return order to: HWT/Fosdick Fulfillment Returns Dept. 12035 Moya Blvd. Reno, NV 89506	All other returns should be shipped to: HWT/Tasco Returns Dept. 9 Jay Gould Ct. Waldorf, MD 20602									
STEP 7	PRINT & SUBMIT: Print completed form and include it in the return package. Or fax to HWT Customer Service at 301.263.2707.										