FORMOR INTERNATIONAL

P.O. Box 2080 Conway, AR 72033
FAX 1-800-750-8155
PHONE 1-888-270-4793
www.formor.com • memberservice@formor.com

U.S. WAREHOUSE EXCHANGE FORM

DATE:	DISTRIBUTOR ID #:	AGENT:

DISTRIBUTOR NAME:

MAILING ADDRESS:

SHIPPING ADDRESS:

CITY:	STATE:	ZIP:	PHONE:

NAME ON CARD: ☐ VISA ☐ MasterCard ☐ DISCOVER NOVUS ☐ JCB

CARD NUMBER | | | | | | | | | | | | | | | | | **EXPIRATION DATE:** /

E-MAIL:

PRODUCT BEING RETURNED

CODE	PRODUCT	QTY	PRICE	TOTAL
			SUBTOTAL	
***NOT RESALABLE**			**TOTAL**	

IN EXCHANGE FOR

CODE	PRODUCT	QTY	PRICE	TOTAL
			SUBTOTAL	
			SHIPPING	
			TOTAL	

DIFFERENCE:

SIGNATURE

DATE

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