

# CUSTOMER REQUEST FOR REFUND



Reliv International Sdn Bhd (564212-D) (AJL 931450)  
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DATE \_\_\_\_\_  
CUSTOMER NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
POSTAL CODE \_\_\_\_\_ CITY \_\_\_\_\_  
TELEPHONE NUMBER \_\_\_\_\_  
.....  
DISTRIBUTOR \_\_\_\_\_  
SHIP TO \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
\_\_\_\_\_  
POSTAL CODE \_\_\_\_\_ CITY \_\_\_\_\_  
TELEPHONE NUMBER \_\_\_\_\_

## REQUEST REFUND FOR THE FOLLOWING PRODUCTS

PRODUCT	QTY	PURCHASE PRICE

Date of Purchase  
(Please attach receipt)

## BRIEF EXPLANATION OF RETURN

REFUND AMOUNT  
ACKNOWLEDGED

CUSTOMER  
SIGNATURE

**TO RELIV:** I certify that I have refunded the above stated amount to the customer. I am enclosing the unused portion of the product and the Customer's copy of the retail sale certification is hereby returned for replacement in kind.

DISTRIBUTOR'S SIGNATURE

I.D. / RCN

DATE

**NOTICE TO DISTRIBUTOR:** This form must be sent for processing within seven days following refund to customer. Customer's unused portion and original sales receipt must be returned for replacement of the products sold.

**COMPANY RECEIPT:** "Customer Request for Refund" and the customer's retail receipt has been received by the company within seven days following refund to the Customer and product has been replaced in kind:

DESCRIPTION OF PRODUCT RELEASED

SHIPPED OUT TO

PICK UP

WAREHOUSE CLERK SIGNATURE

DATE