



Apex Foot Health Industries

Apex Returns
2475 Wright Blvd.
Hebron, KY 41048
1-800-252-2739

RETURN AUTHORIZATION FORM

Apex footwear has a customer satisfaction limited guarantee. Please go to the Apex website to view the full Apex Returns Policy. For a prompt credit please complete and return this form. Please select the most appropriate Return Reason Code from the chart below and fill in the quantity you are returning. When mailing back your return, please include a copy of this Return Authorization Form. You can print a return shipping label online. Please remember to cover or remove any old labels or barcodes on package.

Date: _____

Customer Account#: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Patient name: _____

Order Ref. # _____

Apex Order # _____

Customer PO # _____

| ITEM #/SKU | SIZE/WIDTH | QTY. RETURNED | REASON CODE | COMMENTS |
|------------|------------|------------------|-------------|----------|
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Return Reason Codes:

- 01 Size/Fit
- 02 Damaged In Transit
- 03 Defect

- 04 Not what was expected/desired
- 05 Duplicate Order
- 06 Wrong item / Size

- 07 Other _____

Credit will only be considered for the items listed on this form. If you have additional items to return, please fill out a new Return Authorization Form and send as a separate shipment.