



Name	Order #
Street	Telephone #
Street 2	E-Mail Address
City, State and Zip	

WE MAKE YOUR RETURN AS EASY AS 1, 2, 3...

1. COMPLETE

Complete the Returns or Exchanges Form. Write the items you would like to return, indicate the reason for your return using the provided reason codes, and tell us how you want your return processed.

2. ENCLOSE

Enclose this Form in the package along with the items you would like to return. Make a copy for your records.

3. SHIP PACKAGE

Ship the package back to us using the pre-printed return label at the bottom of this form. Simply detach the label, fill in your return information, take to a shipper of your choice for postage, and leave the rest to us. We highly recommend including tracking on your return package.

ANY QUESTIONS? You will receive your refund in the original form of payment once we have received the returned products at our warehouse. If you are requesting an exchange, you will be refunded and re-charged. If you paid via Paypal, you will be responsible for replacing your order. If you need to receive your replacement item(s) sooner – please call our Customer Service Team to have your exchange order processed now.

RETURNS FORM

Order # _____

Return Reason Codes:

- 01 – Quality Issues
- 02 – Didn't Like Color
- 03 – Didn't Fit
- 04 – Incomplete Shipment
- 06 – Wrong Item Sent
- 07 – Order Arrived Late
- 08 – Damaged in Shipping
- 09 – Ordered Wrong Item
- 10 – Changed Mind/Bought Elsewhere
- 11 – Poor Value for Cost
- Other

ITEMS FOR RETURN (SEE EXCHANGE FORM WITH DETAILED INSTRUCTIONS ON REVERSE SIDE OF THIS FORM)

List the items you would like to return or exchange and indicate the reason for your return using the Return Reason Codes on the right.

REASON CODE	QTY	ITEM NO.	COLOR	SIZE	DESCRIPTION

RETURN Refund will be given in original method of payment.

EXCHANGE Please complete exchange form.

GIFT EXCHANGE Please complete exchange form.

EXCHANGES FORM

ITEMS FOR EXCHANGE: What new products would you like?

QTY	ITEM NO.	COLOR	SIZE	DESCRIPTION	PRICE

SHIP TO ORIGINAL ADDRESS
EXCHANGE WILL BE MAILED TO "SHIP TO" ADDRESS PRINTED ABOVE

NAME _____

ADDRESS _____

SHIP TO NEW ADDRESS
EXCHANGE WILL BE MAILED TO THE ADDRESS AT RIGHT

CITY/STATE/ZIP _____

EMAIL _____ PHONE# _____

OR# _____

Customer Name _____

Street Address _____

City, State Zip _____

REFUND

EXCHANGE

PLEASE ATTACH THIS TO YOUR RETURN PACKAGE

OCM.com
ATTN: Returns
305 West Commerce Street
Chambersburg, PA 17201

TO EXPEDITE YOUR RETURN YOU MUST USE THIS LABEL