

RETURN FORM

ORDER NUMBER:

DATE OF ORDER:

INVOICE / RECEIPT NUMBER:

FIRST NAME AND LAST NAME:

ADDRESS:

TELEPHONE:

EMAIL:

I REQUEST A REFUND:

HOW PAYMENT IS MADE

TO THE BANK ACCOUNT (BIC/SWIFT):

ACCOUNT NUMBER:

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PRODUCT NAME:	QUANTITY:	GROSS PRICE:	REASON FOR RETURN:

CUSTOMER COMMENTS:

Immediately after receiving the form, we will send an e-mail with the address to send the goods.

I DECLARE THAT I KNOW THE TERMS OF RETURN OF GOODS SET OUT IN THE RULES OF THE STORE.

DATE AND READABLE CUSTOMER SIGNATURE