

Return Form



Name + Surname:	
Street name + number:	
Postal code:	
City:	
Country:	
Phone number:	
Email address:	

Order number:	
Date of purchase:	
Name of returned article:	
Quantity:	
Reason for return (optionally):	
Authorization number for return:	

.....
Date, place

.....
Signature

Please attach the above statement to the package with the returned goods