

RETURN FORM

Fill in this return form as completely as possible and add it to the package you want to return.

want to return.
Date / / /
CUSTOMER INFORMATION HI, WHO ARE YOU?
Name
Phone number
E-mail address
ORDER DATA TELL US MORE ABOUT THE RETURN. Order number
Item(s) in return
01
02
03
What is the reason for the return?
The product does not meet expectations (shipping costs for buyer *).
I have received the wrong product.
The product is damaged.
Otherwise, namely
Desired solution

* When a product is damaged, or you have received the wrong product, we will reimburse the costs for the return shipment. If the product does not meet your expectations and you want to use the trial period, then the costs for returning are for your own account.

RETURNADDRESS

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