

# RETURN FORM



## CUSTOMER DATA

NAME AND SURNAME .....

ADDRESS: .....

ZIP AND CITY: .....

STATE: .....

EMAIL: .....

## ORDER DATA

ORDER NUMBER: .....

INVOICE DATE: .....

## ARTICLE DATA

PRODUCT REFERENCE NUMBER: .....

COLOR: .....

SIZE: .....

Please, specify below the reason for your return:

- RETURN
- CHANGE
- WRONG ORDER

In the case of requesting a return, indicate the exact reason.

In the case of requesting a change, indicate the product with which you would like to make the change.

In the case of a wrong order, indicate the details of the article received and the desired article.

## COMMENTS: