

**PRODUCTS RETURN/EXCHANGE FORM**

Name of the person responsible for the return/exchange:

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Address (postal code, city, street, house/flat/apartment number, country):

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Contact details (e-mail address, telephone):

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Delivery date: .....

Invoice number: .....

Returned products:

Model / Name	Quantity	Gross Price	Reason for the return/comment:

Total for the return: .....

Bank account details: .....

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buyer signature

.....

date and seller signature

Attachment: proof of purchase/invoice