RETURN FORM

Buy	ver	de	tai	ls	•

Name Surname / Company name	
Company code	
Address	
E-mail	
Telephone number	
Order and goods:	
Order and invoice number	
Date of receipt of the parcel	
Name of returned item (s) code (s)	
Reason for returning the item (s).	
Please state the reason in detail, eg if the item (s) was	/ were damaged during shipment, please describe
the violations.	
Customer request:	
_	
O Replace with the same quality product.	
O Replaced by another product (Enter name and / or p	product code in the reason for return field).
O I refuse the goods, please return the money by bank	k transfer to the bank account:
Name of the bank	
Account No	
Name Surname of consignee	
I confirm that I am familiar with all the rules of returning	ng the goods of the www.liudoirankiai.com store.
 Date	Your Name, Surname and signature