GOODS RETURN FORM

INVOICE/RECEIPT NUMBER:			
	NAME AND	SURNAME:	
	ADD	RESS:	
	PH	ONE:	
	E-N	IAIL:	
	m requesting a cash refund		
(r	efunds are only possible to		int)
	Bank name and	account number:	
PRODUCT NAME	QUANTITY	GROSS PRICE	REASON FOR RETURN
PRODUCT NAME	QUANTITY	GROSS PRICE	REASON FOR RETURN
PRODUCT NAME	QUANTITY	GROSS PRICE	REASON FOR RETURN
PRODUCT NAME		GROSS PRICE Comments:	REASON FOR RETURN
PRODUCT NAME			REASON FOR RETURN
	Customer	Comments:	
		Comments:	
	Customer	Comments:	