

## RETURN/WARRANTY FORM

DATE: \_\_\_\_\_

CUSTOMER'S INFORMATION:

FILLED OUT BY CUSTOMER					
No.	Product name	Quantity	Reported Issue	Order number	Invoice number
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
14.					
15.					

I confirm that I have read and understood return and warranty policy. I confirm that I am returning the item(s) fully complete.

.....  
signature