



RETURN FORM

Order number:

Purchase date:

Value of the returned product:

Telephone number:

.....

E-mail:

Reasons for return:

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Address of the Buyer

First and last name:

Address (street and apt. no.):

Postal code and city:

Bank account

Bank account number to which the funds are to be returned:

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I declare that I have read the conditions of returns of goods specified in the MOUS Terms and Conditions

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Date and Buyer's signature

Address for returns: **MOUS, ul. Słowackiego 57a, 60-521 Poznań**