

RETURN FORM

IMPORTANT: Please complete this form and include it with your product.
Please make sure that the product is in **new condition**, in its **original packaging** and was purchased in the last **7 days**.

EXCEPTIONS: Please make sure that the product is **NOT** one of **Non-Returnable, Personal and SALE items listed on the return policy page of the website**

Date _____

Contact Details

Name _____

Phone No _____

Product Description

Invoice # _____

Product Name _____

Service required Please tick: refund
 replacement
 other, please specify _____

Reason for Return

Status (our staff only)

Please tick:

returned date _____ sent replacement date _____ refunded date _____