



RETURN FORM

ORDER NUMBER: _____

DATE OF ORDER: _____

NAME AND SURNAME: _____

ADRESS: _____

TELEPHONE: _____

EMAIL: _____

NAME OF RETURNED ITEM

REASON FOR RETURN _____

Please return the money to the bank account number:

Name of the Bank: _____

WARNING! THE RETURN IS POSSIBLE ONLY IF THE ITEM HAS NOT BEEN USED. REMBER TO ADD THE ORIGINAL RECEIPT TO THE PARCEL.

ADRESS FOR RETURN:
JUNGMOB
St. Błękitna
05-126 Stanisławów Pierwszy

(customer's signature)