

RETURN FORM

ORDER NUMBER:		
NAME AND SURNAME:		
PHONE NUMBER:		
REASON FOR RETURN: DOES NOT FIT NOT AS DESC		N'T WANT
TO GIVE A REASON \Box OTHER:		
FORM OF PAYMENT: Przelewy24 PayPal Traditional transfer or payment on delivery (only in Polar 	nd) :	
Bank account number (in case of payment by traditional transfe	r or payment on c	lelivery)
ITEMS	QUANTITY	PRIC

ITEMS	QUANTITY	PRICE

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(Date and signature of consumer)