



RETURN FORM

(Please fill in this form and include it in the package – return will not be accepted
this form)

Order number: _____

Date of order: _____

Full name: _____

Phone Number: _____

Email Address: _____

QTY	PRODUCT NAME	PRICE	REASON OF RETURN

PLEASE, SEND PRODUCTS TO THIS ADDRESS:

SAVANORIU AVENUE 129,
VILNIUS LITHUANIA, 03150
EUROPEAN UNION

Please remember that once we get the delivery, it takes 24-48 hour for the return to be reviewed and processed. We will send you a confirmation letter when the return is processed.