

## EXCHANGE/RETURN FORM

### CUSTOMER INFORMATION:

First and last name : \_\_\_\_\_

Address : \_\_\_\_\_

E-mail : \_\_\_\_\_

Phone number : \_\_\_\_\_

### INFORMATION ABOUT THE DEFECTIVE PRODUCT:

Order number: \_\_\_\_\_

Product name : \_\_\_\_\_

Product code or ID : \_\_\_\_\_

### DEFECT DESCRIPTION :

Defect detection date: \_\_\_\_\_