

CHYLAK

RETURN FORM

Please fill out the Return Form, and place it in a box with the Product. Please seal the box and send within 14 days of the order delivery date to the following address:
ul. Dobra 14/16, 00-388 Warszawa, tel. +48 538 272 292.

I hereby withdraw from the contract of sale regarding the following Product:

order delivery date: _____

order/invoice number: _____

name: _____

mailing address: _____

phone number: _____

e-mail: _____

Signature: _____ Date: _____