RETURN FORM

Customer data			Order number Ord		Order receipt date
			Code	Rea	son for return
Send your parcel here			1	Not fitting well	
Preffered method: Paczkomat	WAW53AP mail: contact@recordglasses.com tel: 797721408		2	Different product was received Defect [please specify]	
InPost			3		
Alternative method:	Record Glasses Nowogrodzka 42/40		4	Other rec	uson [please specify]
Standard shipping	00-695 Warsaw, Poland		5	I don't want to give a reason	
Product code or name		(Quantity	Code and/or reason for return	
Payments are refunded using the same method that was used to pay for the order on our website. In this case, there is no need to fill in the account number in the fields below - you can leave them blank.					
If you prefer the payment to be returned to your bank account - enter its number in the field below. Entering the means that you agree to the return of funds to your bank account.					
I declare that I have read and accept the Record Glasses store terms and regulations and that the returned items have not been used.					
Return date			Legible Client Signature		

REC • glasses