

RETURN / EXCHANGE

Join this slip in the return package

## **INFORMATIONS**

LAST NAME	ORDER N°		
FIRST NAME	DATE	/ /	
ADDRESS	TEL		
	EMAIL		
ZIP CODE / CITY			
COUNTRY	OBJECT	RETURN	EXCHANGE

## **RETURNED PRODUCTS**

PRODUCT NAME	REFERENCE	SIZE	PRICE	RAISON OF RETURN
		TOTAL		

## EXCHANGED PRODUCTS (list the products you want to order in exchange)

Attention, thank you to ensure that the products are available on the website, for more information call us at +33 (0)1 44 52 19 06

PRODUCT NAME	REFERENCE	SIZE	PRICE	RAISON OF RETURN
		TOTAL		

SIGNATURE