



MORE INFO?
SCAN THE CODE

RETURN FORM

Fill in this return form as completely as possible and add it to the package you want to return.

Date _____ / _____ / _____

CUSTOMER INFORMATION HI, WHO ARE YOU?

Name _____

Phone number _____

E-mail address _____

ORDER DATA TELL US MORE ABOUT THE RETURN.

Order number _____

Item(s) in return

01	_____	04	_____
02	_____	05	_____
03	_____	06	_____

What is the reason for the return?

The product does not meet expectations (shipping costs for buyer *).

I have received the wrong product.

The product is damaged.

Otherwise, namely _____

Desired solution _____

* When a product is damaged, or you have received the wrong product, we will reimburse the costs for the return shipment. If the product does not meet your expectations and you want to use the trial period, then the costs for returning are for your own account.

RETURN ADDRESS

Adfuntage B.V.

Attn. Ronald Verkerk

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4661 VM Halsteren

The Netherlands

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