

Return form

Phaedra Botanicals OÜ

REVOCAATION

I, with this, give notice that I want to withdraw from the contract and return my product/s

_____ (state quantity and the name of the product/s)

purchased on _____ (state date), order no. _____ (state order number - required).

I confirm I have not opened the product or used it and return it in the condition it has been delivered to me.*

RETURN

Return after one time off use (more than 90% of the product must be untouched):

I, with this, give notice that I want to return the product/s

_____ (state quantity and the name of the product/s) purchased on _____ (state date), order no. _____ (state order number - required), due to

_____ (state your reasons).

I confirm I have not used more than 10% of the product and otherwise return it in the condition it has been delivered to me.*

Ordered on (*)

Received on(*)

Name of the Customer(s)

Address of Customer(s)

Email

Phone

Date

Signature

State payment method used during purchase

PB representative responsible for the return (to be filled by Phaedra Botanicals)

Date of receiving a package back

Eligible YES NO

Date of return
Reimbursed YES NO

* This is subject to review by Phaedra Botanicals upon return.