

RETURN FORM

First Name:	
Last Name:	
Address:	
Postcode:	
Country:	
OI N-	
Order No.:	
Date:	

Product	Exchange/Refund (please specify)	Exchange for (please specify Size & Colour)	Reason For Returning

Please send this form together with your returned items to:

Verry Kerry Ltd 143 Leamore Court 1 Meath Crescent E2 0QQ