

RETURNS FORM

Customer Name / Address:		Order Number:			
		Order Date:			
Foresil					
Email:					
Telephone:	l				
Product / Reference:	Quantity Returned:	Return Code:	Action Code:	Comments:	
Reason for return codes: A = Purchased the wrong item / B = Productits description D = Product was damaged upoproduct was received G = Product was found	n arrival	/ E = Pro	oduct is f		
Return action codes: 1 = Refund / 2 = Exchange I confirm I have read and agree to the Face the Please print, sign and date below:	ne Future i	returns p	olicy on 1	acethefuture.co.uk.	
Customer Name:					
Today's Date:					
Signature:					