

# LUMERI

## RETURNS AND RMA

If you wish to return a product to us, this Claim Form must be completed and included in the package. We recommend that you read the enclosed instructions to avoid problems with your RMA.

### All fields must be filled in.

We also ask you to describe any faults in detail so that our technicians can check the fault immediately.

Name	
Address	
Postal code	
City	
Phone #	

**Note:** The address you enter above will be the address we send returns to

Order Date / Date Received	
Order Number:	

**Note:** Order number **MUST** be filled in. If you do not fill in the order number or attach a copy of the invoice, we cannot process your RMA.

Cross;

I am returning the item within my 14 day return policy and would like a refund.

I am returning the item as it has a fault that I want to complain about.

I am returning the item for another reason.

If your product has a defect, please write a thorough description of the defect below. Please attach email correspondence or additional paper with description. Not to be filled in when using the right of return, where the product does not have a defect.

Your package must be sent to;

**LUMERI**  
Energivej 3  
4180, Sorø  
Denmark

Current Date & Customers Signature: