

Bulb Ventus d.o.o. Sonča pot 13 6320 Portorož Slovenia

RETURN OF GOODS FORM (WITHDRAWAL FROM CONTRACT)

Order No.:			
Invoice No.:			
Date of return:			
CUSTOMER: Name and Surname: Address: Postal code and post office: Telefon No.: E-mail: Refund payment in the following manner The same payment method as used to the same payment of the same payment method as used to the same p	r (mark/fill i	in):	
Product name	Quantity	Reason for return	
D	Ι,	5 H 1/ / I	
Return the items by mail to the address:		Bulb Ventus d.o.o.	
		Sončna pot 13	
	[6320 Portorož, Slovenia	
Date:	<u> </u>	Customer signature:	