

LE POLLEN
WARSAW

Date, Place

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RETURN FORM

I,, hereby inform you of my withdrawal from the sales contract for the following products:

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Order Number:

Date of receipt:

Reason for return (Your opinion is important to us!):

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PLEASE REFUND THE PAYMENT TO MY BANK ACCOUNT:

Bank Name:

I hereby declare that I am aware of the return conditions for the goods as specified in the Store's Terms and Conditions.

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Legible signature of the customer