

 **RETURNS FORM**

Company address:

Company Name/Account Reference:

Please tick appropriate: CREDIT □ EXCHANGE □

Invoice Number:

|  |  |  |  |
| --- | --- | --- | --- |
| **Frame Model** | **Frame Colour/Size** | **Quantity** | **Reason for return** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**Additional Comments:**