

RETURNS FORM

Please fill in this form and only send it back if you wish to withdraw from the contract

RETURNS ADDRESS:

Golden Tree d. o. o.

Alpska cesta 43

4248 Lesce

I wish to return the following items:

.....
.....

Name, surname, email:

.....

Address:

.....

Invoice reference number:

Order number:

Refunds will be made by bank transfer to the following bank account. Please provide the following details: bank account number, sort code, bank name.

.....

Date and signature

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