

Date:	
_ 0.00	

## NEED TO RETURN OR EXCHANGE SOMETHING?

<u>SENDER</u>					
NAME:			WEB ORDER ID:		
Return Item Code:			Quantity:		
Return Item Code:			Quantity:		
Return Item Code:			Quantity:		
Return Item Code:			Quantity:		
Return Item Code:			Quantity:		
Return Item Code:			Quantity:		
Email:					
Tel:					
*It is important to fill these information, in case we need to contact you.					
REASON FOR RETURN					
Choose one of the b	elow:				
- Money return					
- Exchange with the same item					
INFORMATION FO	R RETURNING MO	NEY BACK			
Bank Account:					
IBAN			Bank:		
Name					
l agre	e with the Return Policy	of https://littlehip	po.gr/returns-policy		

Signature