

DIKA

RETURN / PRODUCT(S) EXCHANGE FORM

Name and Surname of the Client / Name of the Legal Entity and UIC:

Your request:

Product return Product exchange Size exchange

Order No / date: _____ / _____

Article Number / size : _____ / _____

Product exchange / size: _____ / _____

(Fill out in case of exchange only)

Reason for return / exchange: _____

Delivery Address:

City / Village: _____ Postal code: _____

District / Street Number: _____

Telephone: _____ E-mail: _____

Reimbursement of amounts due / difference in exchange for an item of lower value:

IBAN: _____ BIC: _____

Bank: _____

The difference in case of replacement with an item of higher value is paid by the Customer upon delivery.

All transport costs are at the expense of the Client.

Return address:

E Miroglia Trade SRL,
Bd. Paul Teodorescu, nr 4,
Sector 6 Bucuresti,
in incinta Mall Afi Cotroceni

Date, year _____

Signature of the client: _____