

## **RMA** report

Protocol nur	mber (do not fill) :	
.customer		
Name and surname :		
Company :		
Phone:		
E-mail :		
.i want to exchange t	his product	
Product name :		
Date of purchase :		
Visual condition of goods :		
Product ID : Order number :		
Invoice number:		
Defect description :		
.how do you want to	solve this RMA	?
I want my money back (r  I want from you to send		
IBAN bank account number i	n case of refund :	
Place and date of the exchange protocol :		Employee name, signa- ture and stamp:
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