S É Z A N E

•.•

SECOND RETURN FORM

SURNAME	NAME
ORDER NUMBER	
EMAIL ADDRESS	
REFERENCE(S) FOR RETURNING ITEM(S) & QUANTITY	
NAME OF THE PER	RSON YOU ARE IN CONTACT WITH
TO CONFIRM YOU	R SECOND RETURN:
1. Write your order nu	mber by hand in the box at the bottom of the form
2. Cut along the line a	nd visibly stick your order number on the front of your box
3. Slip the rest of the f	orm in your box
4. If you have a free field	eld when printing the return label, we recommend inserting your order number
RETURN ADDRESS	:
	Denison Street LSDALE NSW 2036
	TO 10 WORKING DAYS FOR OUR ATELIER R RETURN PACKAGE.
account debite • However, plea	was paid by a credit card, the refund will be made directly to the bank ed during the purchase. ase note that a refund of an order made with an e-gift card, gift card, will be automatically refunded as a credit note.
>	
	ORDER NUMBER