



# TURQUOISE

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INVOICE TYPE	No	DATE FOR FILLING FORM	PAGE
RETURN FORM	1		1/1
<b>FULL NAME:</b>			
<b>ADDRESS:</b>			
<b>TELEPHONE:</b>			
<b>DESCRIPTION:</b>			
<b>CAUSE OF RETURN OR CHANGE OF PRODUCT</b>			
<b>FOR MONEY RETURN COMPLETE THE FORM</b>			
<b>BANK:</b>			
<b>BENEFICIARY'S FULL NAME:</b>			
<b>IBAN:</b>			
<p>PLEASE SEND THE FORM WITH THE PRODUCT AND INCLUDED NECESSARY ORIGINAL PROOF OF THE MARKET INVOICE RETURNS ARE RECEIVED WITHIN 14 DAYS. THE CHARGE TO THE TRANSPORTATION FOR THE RETURN IS CHARGED TO THE CUSTOMER AND FOR THE REPLACEMENT OF THE PRODUCT IS CHARGED TO THE COMPANY.</p>			
<b>SIGNATURE /COMPANY SEAL</b>		<b>CUSTOMER SIGNATURE</b>	