

The Research

*dr. eslee*

## RETURNS FORM

CUSTOMER NAME	
CUSTOMER ORDER NO.	
ITEM NAME	
ITEM DESCRIPTION	
REASON FOR RETURN	
<input type="checkbox"/> CHANGE MIND	<input type="checkbox"/> FAULTY
	<input type="checkbox"/> INCORRECT ORDER
ADDITIONAL INFORMATION	

Please print out this form, fill it and return it with the items. All items returned to dr.eslee USA must be correctly packaged, wherer possible in the original packaging.