

Return FORM

OSCARE.

Online Fashion Boutique

Name Client:

Order Number:

Adress:

Date: .././..

Subject: return

I hereby given notice that I revoke on agreement relating to the sale of the € product (s):

Description of the product	Purchase Price	Date of receipt	Reason of return

The IBAN number at which we transfer the amount in return:

(this BAN number must be equal to the IBAN number used in your order)

You as a consumer, have the right to cancel the contract/ to withdraw withing 14 days of receipt of the product supplied.
This form needs to be sent together with the return.

Return address:
OSCARE.
Beukenhofstraat 101
8570 Vichte – Belgium

Signature customer

PLEASE NOTE THAT PRODUCT NEED TO BE IN THEIR ORIGINAL CONDITIONS WITH THEIR BRAND TAG +
RETURN CHARGES ARE AT YOUR COST