Returns Form



Address:	Customer Name:				Date Returned:				
			Contact Number:						
1	PLEASE	COMPLETE ALL RE							
Item No.	Product Name	Faulty (Replacement needed)	Ity, Reason fo Intermittent fault?	Repair	Warranty Claim	Other Reason	Invoice Number		
1									
2									
3									
4									
5									
1. Da 2. No 3. Fa	e to view the full Martin Lynch & Imaged Returns, contact ML&S In-faulty products need to be ret Iulty goods need to be returned In-faulty products may be subje	immediately (max. 48 curned within 14 days o within 14 days of purc	hours from of purchase. hase and a	delivery replace	r). ment will l	oe arranç			
1. Da 2. No 3. Fa 4. N	imaged Returns, contact ML&S on-faulty products need to be returned on-faulty products may be subjected in the subject of the	immediately (max. 48 curned within 14 days o within 14 days of purc ct to 20% re-stocking t	hours from of purchase. hase and a fees from th	delivery replace e overa d and agre	ment will the second of the se	oe arrang the prod			