

QuitSmokingAid.co.uk Return Form:

Return to:

Gower Enterprises,
Coed-Y-Dwr,
Oldwalls,
Gower,
SA31HA

Please print and enclose this form with your return parcel.

Please ensure that you complete the returns form indicating whether the goods are faulty, unwanted or incorrect, and if you would like a refund or exchange.

Customer Name:		
Order Number:		
Product Name:	Qty:	*Reason For Return:

*Reason for return: Please use the following reasons: Incorrect order, faulty product, not wanted (returned unopened)

Customer Signature _____

Date _____