

# Return note

Return address:

UniService GmbH  
Hilschen 10  
34270 Schauenburg  
Germany

Please fill out this form completely for the return and put it into the returning package.  
Thank you very much.

**Your entries** (please fill out in block letters)

Order number:	
Order date:	
Company:	
First name, surname:	
Street, number of house:	
Postcode, City:	
Country:	
Phone:	
E-mail:	

**Goods being returned** (please fill in in block letters or enclose a copy of the invoice)

Quantity:	Product name:	Reason for return:

---

Date / Signature