

Product Return & Credit Form

Customer Details

Company Name: _____

Contact Name (Full): _____

Phone Number: _____

Email Address: _____

Return Delivery Address - If Applicable

Leave empty if the address is the same as your usual delivery address.

Company Name: _____

Address: _____

Contact Name (Full) _____

Phone Number: _____

Email Address: _____

Return Delivery Address

Enclose return form with product in well-sealed box to:

Deeco Services Ltd.
ATTN: Returns
35 Wakefield Street,
Alicetown 5010

Support Ticket

Signature: _____

Date: _____

Product Return & Credit Form

Return Item Description - #1

Original PO Number: Required _____

Deeco Invoice Number: _____

Product Code: _____

Product Description: _____

Quantity: _____

Reason for Return: Required Credit Repair Warranty Return Others

Additional Comments:

Provide details on the reason for return.

Return Item Description - #2

Original PO Number: Required _____

Deeco Invoice Number: _____

Product Code: _____

Product Description: _____

Quantity: _____

Reason for Return: Required Credit Repair Warranty Return Others

Additional Comments:

Provide details on the reason for return.

Product Return & Credit Form

Return Item Description - #3

Original PO Number: Required _____

Deeco Invoice Number: _____

Product Code: _____

Product Description: _____

Quantity: _____

Reason for Return: Required Credit Repair Warranty Return Others

Additional Comments:

Provide details on the reason for return.

Return Item Description - #4

Original PO Number: Required _____

Deeco Invoice Number: _____

Product Code: _____

Product Description: _____

Quantity: _____

Reason for Return: Required Credit Repair Warranty Return Others

Additional Comments:

Provide details on the reason for return.
