## MADS.Z



## Return of items purchased at www.madsz.dk

| I wish to exercise my right of cancellation  | for my order for the following goods:          |      |
|--|--|------|
| (Fill in the form below in block letters- an | d see the back for further information on retu | rns) |
| Order no.                                    |  |      |
| Date of receipt:                             |  |      |
| Name:  |  |      |
| Adress:                                      |  |      |
| Zip code and city:                           |  |      |
| Telephone no.                                |  |      |
| Email:                                       |  |      |
| Date:  |  |      |
| Signature:                                   |  |      |

## Fill in the item no. on the returned goods and reason for return:

|          | Sæt X              |            |             |                 |
|----------|--------------------|------------|-------------|-----------------|
| Item no. | Regretted purchase | Wrong size | Item broken | Describe defect |
|          |                    |            |             |                 |
|          |                    |            |             |                 |
|          |                    |            |             |                 |
|          |                    |            |             |                 |
|          |                    |            |             |                 |
|          |                    |            |             |                 |
|          |                    |            |             |                 |

The goods must be sent to:

Mads Z A/S Sivlandvænget 27C DK-5260 Odense S DENMARK