

### Part to fill in by CLIENT

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**NAME CLIENT**

**STREET + NB**

**PC + CITY**

**COUNTRY**

**MAIL**

**PHONENUMBER**

**INVOICE NB & DATE**

**SHOP OF PURCHASE**

**PART(S) SEND BACK**

**NEW PART(S) IN RETURN**

**REASON OF RETURN**

**Please send back the part in return to address below. Don't forget to add:**

- \* Return form
- \* Copy of invoice
- \* Mention 'RETURN' on the box

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