cris

Return form **General details:** Name: Order number: City: Telephone number: Address: Email: **Brand** Type of article Reason for return Insured returnlabel* provided by cris Yes *The costumor will carry the costs for returning the products No Date:

Send the completed form to info@cris.nu

Return address:

Signature:

Cris Mannen Springweg 7A 3511VH Utrecht The Netherlands