

PLEASE PRINT AND SEND BACK WITH YOUR RETURNED GOODS

# ELECTREX RETURNS FORM

PLEASE COMPLETE ALL PARTS OF THIS FORM

DATE:		
COMPANY NAME:	INVOICE NUMBER:	
CONTACT NAME & TEL:		
EMAIL ADDRESS:		
PARTS BEING RETURNED:		
MAKE, MODEL AND YEAR OF BIKE:		
FAULTS/REASONS FOR GOODS BEING RETURNED		
PLEASE INDICATE ACTION TO BE TAKEN:		
REFUND	REPLACE	TEST
REPAIR	EXCHANGE	

FOR ELECTREX WORLD USE:

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