outremesure

## RETRACTATION FORM

Form to send us back, before the expiry of the withdrawal period
(14 days from the receipt of your products) by mail to the following address
retours@outremesure.fr and to attached to your parcel.

**Delivery n° :** **Received on :**

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**NAME :**

**FIRST NAME :**

**COMPENSATION MODE (Exchange or refund) :**

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| Reference | Size | Brand | Price | Quantity | Sub-total |
|---|---|---|---|---|---|
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| | | | TOTAL | | |

**Date and signature**