

Return note

NO Medical device



Servicenummer: _____	Gültig ab: 23.01.2024	Freigabe Nathalie Faschian	Revision B
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Dear Customer,
to ensure your request the fastest possible, please describe the reason for the return as precisely as possible.

Address (stamp if necessary)

Name: _____

Street: _____

Postal code, City: _____

Articel data

Manufacturer _____

Article number: _____

Description: _____

Lot/Serial number: _____

Quantity: _____

Invoice number: _____

Reason for return

Function: _____

Wrong article received

damage due to transport

other reason: _____

Remarks

Please return the product to us clean and securely packaged.

NO decontamination necessary, because not a medical device.

I hereby confirm the accuracy of all information:

Name: _____ Date: _____ Signature: _____

Thank you very much for your assistance!
Your EMOS- Team