



returns form

Please complete all the details on this form and sign the declaration so that we can process your return as efficiently as possible.

Your Order Number:

Your Name:

Your Post Code:

Item(s) & Reason(s) for return:

continue on a separate sheet if necessary

step 3

Return Declaration

Now please check, tick and sign this declaration. If you cannot tick all the boxes or have any problems, please call Customer Services on 03330 160 000.

I confirm that I am returning the item(s) within 30 calendar days of delivery:

I confirm that this return is unused and well packaged so it is suitable for return:
and the item(s) in this return...

- was not collected from the Complete Care Shop premises:

- was not originally made to order:

- was not to my specification/personalised:

- does not present a health/hygiene risk:

Please **sign** and **date** below to confirm you are happy with all the details on this form:

signature

dd/mm/yy



step 2

Now please simply tick what you would like us to do once we receive this return.

Call me to discuss an alternative as this was not suitable:

I have paid for a replacement so please refund this return immediately:

I have called to arrange an alternative - call me when you get this to complete:

I would just like a refund:

NEED HELP?

Visit www.completecareshop.co.uk/returns or call Customer Services on 03330 160 000

Lastly, please fold along the two dotted lines so only this panel is visible. Attach to your return with this returns address face-up.

Please return this package to:

Returns
completecareshop
330 Four Oaks Rd
Walton Summit Centre
Preston
PR5 8AP

