

# Goods Returns Form

<b>Date</b>		<b>Invoice No</b>		<b>Your Reference/Order No:</b>	
<b>HiTech Customer Name</b>					
<b>Address</b>					
		<b>Postcode</b>			
<b>Telephone Number</b>					
<b>Date of Delivery</b>					
<b>Date Goods Returned for Inspection</b>					
<b>Product Description</b>					
<b>Qty</b>	<b>W</b>	<b>H</b>	<b>Frame Colour</b>	<b>Slat Colour</b>	<b>Other information</b>
<b>Reason for Return</b>					
<b>Office Use Only</b>					
<b>Results of Inspection</b>					
<b>Inspection Carried out by:</b>			<b>Credit issued (if applicable)</b>		
Return the completed form to the HiTech Blinds <a href="mailto:info@hitechblinds.co.uk">info@hitechblinds.co.uk</a>					