

Return form

Fill out the form and email it to kundtjanst@mwiah.se.

Only after an approved return will it be possible to return the item.

Customer number

Invoice/Order number

Clinic name/Company name

Date

Item number	Quantity	Item description	Return, expiration date if applicable

The item can only be returned after receiving approval for the return.

The return is submitted by

Name

Date

Phone