

SUBSTITUTION / RETURN FORM

print and write

PART TO BE INSERTED IN THE PACKAGE:

NAME AND SURNAME: _____

ORDER NUMBER: _____

SUBSTITUTION ☐ RETURN ☐

REQUEST:



PART TO BE ATTACHED TO THE OUTSIDE OF THE PACKAGE:

SEND TO:

New Order Wharehouse

Via Barolo nr. 9/12

47838 Riccione (RN)

Italy

Phone: +39 0541 691275

Mail: neworder@neworder.it