

Date: / /

Customer Details

First Name:	Last Name:	
Phone number:	Email:	
Street address:		
Suburb:	State:	Postcode:

Return Item

Item Description	Quantity	Price

Reason for Return

- Change of Mind Wrong Size Faulty Good

Additional Comments**Return checklist** (please tick)

- Are the items are in original condition, have original packaging and have tags attached?
- Have you included your receipt?
- Is the Return Request Form completely filled out?
- Will Smokemart & GiftBox receive these items within 28 days of when you originally received them?
- Have you read our Return Policy?

Signed: _____

Date _____