



A MATERIAL DEFECT CLAIM- RETURN FORM

I REQUEST THAT A MATERIAL DEFECT BE CLAIMED

Name and surname: _____

Address: _____

Postal code, city, country: _____

Date of order: _____

Order number: _____

Detailed description of material defect claim:

Contents of the package received:

Note: The product you are returning to claim a material defect must be accompanied by all accessories, if any, at the time of return.

When the material defect was discovered (date):

If the material defect is justified, I would like to (please circle)

- Refund the purchase price (please specify your bank account number):

- Replacement for the same item (in case it is in stock in the warehouse)
- Rectification of the fault
- Proportionate refund of the purchase price according to the defect

Date and signature of the buyer _____

Send the form together with the product unsolicited, by ordinary mail to:

My Voice, My Choice, Institute for the Protection and Advancement of Reproductive Rights
GLINŠKOVA PLOŠČAD 9
1000 Ljubljana
Slovenia

Thank you!