**GPO Returns Form – End User**

Please send completed form directly to:returns@protelx.com

|  |  |
| --- | --- |
| **Today`s Date:-** |  |

**YOUR DETAILS**

|  |  |
| --- | --- |
| **CONTACT FULL NAME** |  |
| **CONTACT MOBILE NO** |  |
| **EMAIL ADDRESS\*** |  |
| **\*PLEASE NOTE:- IMPORTANT WE NEED YOUR EMAIL ADDRESS TO SEND YOU A RETURNS LABEL – IF YOU DON’T PROVIDE AND EMAIL ADDRESS, WE ARE UNABLE TO COLLECT YOUR ITEM AND REPLACE IT** |
| **“YOUR ADDRESS INFORMATION FOR THE RETURNS LABEL AND REPLACEMENT TO BE SENT TO”:-** |
| **CUSTOMER FULL ADDRESS** |  |
| **ADDRESS** |  |
| **ADDRESS** |  |
| **CITY**  |  |
| **POSTCODE** |  |

**YOUR PRODUCT FAULT REPORT**

|  |  |
| --- | --- |
| **Product Model and Colour**(please provide full details for each unit being returned) |  |
| **Fault – please give as much detail as possible**

|  |
| --- |
| * Broken Parts / Cosmetic Damage
 |
| * Not Dialing Out
 |
| * No Power / Intermittant Power
 |
| * No Sound
 |
| * Speed
 |
| * Won't Record
 |
| * Other (please provide details)
 |

 |  |
| **DO YOU REQUIRE A REPLACEMENT? IF YOU REQUIRE A CREDIT, PLEASE CONTACT THE SHOP WHERE YOU PURCHASED YOUR ITEM FOR A REFUND/CREDIT:-** **REPLACEMENT** **CREDIT (UNLESS SPECIFIED)** |

**IF YOU ARE ARRANGING COLLECTION YOURSELF, PLEASE CONTACT US FOR A RETURNS NUMBER BEFORE SENDING.**