

Refund Request

Buyer

Name: _____

Surname: _____

E-mail: _____

Country: _____

Seller

Seller Name: UAB "BSCTD"

Registration code: 304079838

Address: J. Basanavicius 3,
LT-75138 Silale, Lithuania

Reason for refund:

Date of purchase: _____

Refund amount: _____

Attached documents are required: Bank statement of the transaction Other important documents