**COMPLAINT/RETURN FORM**

|  |
| --- |
| **Customer meets** |
| **Name** | **Surname** | **Address** |
|  |  |  |
| **Post code** | **Country** | **Contact telephone** |
|  |  |  |
| **E-mail address** |
|  |
| **Description of the complaint/return (please state the reason for the complaint/return)** |
|  |
| **Specify what you want to do with the product you are advertising (mark with an X):** |
|  | I want a replacement product |  | I want a refund |
| **Account number for refund \*** |
|  |
| **Bank name\*** | **Owner of the account\*** |
|  |  |

\* not necessary if the data is the same as on the order

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Complainant Date

 (an additional stamp if it is a company) (dd.mm.yyyy)