Complaint form

Customer making a claim		
Name and surname		
Address		
Mail		
Phone		
Complained goods		
Order number		
Reason for complaint		
Description of the defect		
2 and and	I	
Suggestions and comments		
Accepted on	Customer signature	Signature of the recipient
Accepted on	Customer signature	Signature of the recipient
Statement by the		
recipient		
Done on	Signature of the recipient	
Recipient:		
r to c.p.c. i.i.		