

SENRIC.COM COMPLAINT FORM

Place
Date.....

Buyer's data

Name and surname:

Place:

Street:

Postcode:

Phone number:

E-mail address:

Order number:

Claimed product

Name of product:

Price:

Date of purchase:

**Reason
for claiming
the product:**

**Additional
information:**

I declare that I have read the terms of complaint procedure applicable to the senric.com shop

date and signature of the Buyer

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