RMA FD-DISTRIBUTION
MARYLI 19
02-842 WARSAW
SUPPORT@FLAVOUR-DESIGN.PL

COMPLAINT FORM

COMPANY NAME:
RETURN ADDRESS:
E-MAIL:
PHONE:

POSTING DATE

P - POSITIVE: EXCHANGE OF PRODUCTS

N - NEGATIVE (PRODUCTS DAMAGED MECHANICALLY OR NATURALLY WORN)

C - CORRECTION

D - NO DAMAGE DESCRIPTION

CUSTOMER			FD-DISTRIBUTION
PRODUCT NAME	DAMAGE DESCRIPTION	NR FV, CREATE DATE	ANSWER