



CUSTOMER COMPLAINT FORM

PLEASE FILL IN THE FORM LEGIBLY (CAPITAL LETTERS)

CUSTOMER INFORMATION:

FULL NAME:	
STREET:	
POST CODE:	CITY/COUNTRY:
PHONE NUMBER:	E-MAIL ADDRESS:

ORDER DETAILS:

ORDER NUMBER:	
NAME OF THE PRODUCT:	SIZE:
INVOICE NUMBER:	
DATE OF PURCHASE:	PRICE:

THE CAUSES OF COMPLAINT:

DESCRIPTION OF THE FAULTS:	
DATE OF NOTICING THE FAULTS:	
CIRCUMSTANCES OF NOTICING THE FAULTS:	
CUSTOMER'S CLAIMS:	*reparation/replacement/cash back/reduction in product value

* select one

I hereby agree for processing my personal data for the purposes of complaints by MISICO Sp. z o.o. Sp. k. located in Lodz (92-221), ul. Nowogrodzka 2c. Clients have the right to access their Data, to modify or delete them. Personal data controller is MISICO Sp. z o.o. Sp. k. located in Lodz (92-221), ul. Nowogrodzka 2c.

Date and signature of the Complainant

RECORDED BY KICKSMANIAC.COM:

DATE:	RMA:
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