

COMPLAINT/RETURN FORM*

Date:

MINOU Cashmere Natalia Rochacka

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Email: sklep@minou.pl

Phone: +48 690 120 096

I hereby inform you about the **COMPLAINTS/WITHDRAWAL OF SALES AGREEMENT*** for the following items (name and price of the goods):

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Order number:

Date of receipt of the goods:

Name of the Consumer:

Consumer's phone number/e-mail address:.....

Consumer's address:

.....

Bank account number (please enter your account number if your order was paid by COD):

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For **COMPLAINT**, please describe the product defect and whether the product is to be replaced or refunded to your account:

1. Description of product defect

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2. Product replacement YES/NO

3. Refund to your account YES/NO

In the case of a **WITHDRAWAL FROM THE SALES AGREEMENT**, we would be most grateful if you could let us know the reason for returning the product. Your feedback is optional, but it helps us to better meet your expectations.

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Consumer's signature (only if the form is sent on paper)

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* cross out what is unnecessary