iVendo solar

....
(City and date)

COMPLAINT/RETURN GOODS ACCEPTANCE PROTOCOL

number ....

Product name/symbol:

Invoice number:

Customer information:

....
(Name and surname/Company name)

....
(address)

....
(Tax ID, additional information)

Reason for return:

....
....
....
....
....
....

....
(signature of person accepting returned goods)

* strike out as necessary