

Complaint Form

COMPLAINANT DETAILS	RECIPIENT
First & Last Name / Company _____	NEXURA SPÓŁKA Z OGRANICZONĄ ODPOWIEDZIALNOŚCIĄ
Address / Registered Office _____	ul. Kolistą 25
Email _____	40-486 Katowice
Phone _____	Poland
	E-mail: info@shottasseeds.com

PURCHASE DETAILS

Date of Purchase

Date of Receipt of Product

Purchased Products

DESCRIPTION OF PRODUCT DEFECTS

REQUEST	EMAIL RESPONSE CONSENT
_____	I do / do not* consent to receiving a response to this complaint at the above Email address.
_____	Client's Signature _____

* Delete as appropriate.