

.....
City and date

COMPLAINT FORM NO.

FULL NAME:

ADDRESS:

PHONE NUMBER

E-MAIL:

ORDER NUMBER

NAME / ITEM CODE OF THE PRODUCT BEING COMPLAINED:

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

No.....

Receipt or Invoice Number (please mark the appropriate one)

REASON FOR COMPLAINT:

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.....

Bank account number:

.....

.....
Signature of person accepting the return

.....
Signature of person returning the product

Please send the completed form along with the product and proof of purchase to::

WooHooBikes.com
ul. Rudzka 38/3
47-400 Racibórz
Poland

Phone # (+48) 733 128 126