|  |  |  |
| --- | --- | --- |
| Date of complaint: | Date of product delivery: **(mandatory)1** | |
| Person/company name submitting the complaint: | Purchase order number: | Complaint number by GeneMe: |
| Contact number: | | |
| Email: | | |
| The subject of the complaint: | | |
| Type of damage:  □ broken □ melted □open lid □ wet □other, please describe: | | |
| Detailed storage conditions:   |  |  | | --- | --- | | Box LOT number | Quantity | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | | Total number of boxes returned: |  | | | |
| Description of the complaint: | | |
| Signature of the person making the complaint: | | |
| The result of assessing the complaint (to be filled by **manufacturer**): | | |
| Date: | Signature of the person responsible for assessing the complaint: | |

Complaint received by GeneMe:

1We are not able to accept complaint without this information.

Remember you cannot mix box components.