



WINALITE INTERNATIONAL, INC. (PHILIPPINES)

10TH FLOOR AIC BURGUNDY EMPIRE TOWER, ADB AVE.
COR. SAPPHIRE & GARNET RDS., ORTIGAS CENTER, PASIG CITY

Form No: _____

PRODUCT COMPLAINT FORM

Name of Customer / Distributor: _____

Membership Code: _____ Contact Nos: _____

Address: _____

WSC Operator where product was bought: _____

Date of Purchase: _____ Receipt No: _____

Product: _____

Batch No: _____

Note: Please surrender product/s to WSC.

Specific concern about the product:

Name & Signature of customer/distributor

FOR WINALITE PERSONNEL USE

Recommendation/Comment: _____

Recommended by:

Marketing Manager

Comment: _____

Noted by:

General Manager

Remarks/Comment: _____

Acted on by:

Operations Manager