

Complaint form

Fill out the form and email it to kundtjanst@mwiah.se. Do not dispose of the product while the case is ongoing.

We will get back to you with further instructions.

The item can only be returned if the complaint has been reviewed and approved.

Customer number

Invoice/Order number

Clinic name/Company name

Date

Item number	Quantity	Item description	Serial/Batch number

Please also attach photos when you submit the form. Note that we cannot process complaints without photographic evidence.

Please provide a detailed description of the reason for your complaint.

Complaint submitted by

Name

Date

Phone