

Non Receipt of Goods Form

Name

Address

Postcode

Telephone

Dear Sir/Madam,

Further to my complaint on / / about non-delivery of an item of mail containing

This was sent to me by you on / / I contacted my own local Delivery Office about not receiving these goods.

I confirm that I have not received the goods referred to above and that this form has been sent within 10 days of my original telephone call.

Signed: _____