

WRONG DELIVERY /UNACCEPTABLE SIGNATURE

CONSIGNEE AFFIDAVIT

*Required fields are marked with **

PARCEL NUMBER*:

CONSIGNEE:

Name, Surname* _____

Delivery address* _____

Consignee's e-mail address*

Consignee's phone number*

STATEMENT:

I certify, under penalty of perjury, that I have not received the mentioned parcel.

Comments (optional)

Consignee's signature* _____

Date of completion* _____