

Retail Product Quality Feedback

Date

Store Name/Location

e.g. Downtown Branch

Product Name/Code

e.g. ABC123 or Chocolate Bar 50g

Batch Number (if available)

e.g. B4598

Purchase Date

Appearance

Select

Packaging Condition

Select

Detailed Feedback

Describe your experience with the product, issues, or suggestions...

Your Name (Optional)

e.g. Jane Doe

Contact Information (Optional)

Email or phone number