**MODERE MINERAL LIQUID FOUNDATION VOLUNTARY RECALL**

**REACTION AND CUSTOMER ADVICE FORM**

**Please complete if you have sold or given products to anyone or experienced an adverse reaction**

**Please use the space below to provide names, contact information, number of products purchased (including type and date of purchase). Please photo copy and use additional sheets if necessary:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name**  | **Detail of Liquid Foundation Purchased Including Date** | **Address** | **Phone** | **Email** | **Adverse Reaction Details if any, if none – state NIL****.** |
|  | Lot Number \_\_\_\_\_\_No. of units purchased \_\_\_\_Date: / /2018  |  |  |  |  |
|  | Lot Number \_\_\_\_\_\_No. of units purchased \_\_\_\_Date: / /2018 |  |  |  |  |
|  | Lot Number \_\_\_\_\_\_No. of units purchased \_\_\_\_Date: / /2018 |  |  |  |  |
|  | Lot Number \_\_\_\_\_\_No. of units purchased \_\_\_\_Date: / /2018 |  |  |  |  |

Please return this form with the product (if applicable) to:

**Modere Australia Pty Ltd (Foundations)**

REPLY PAID  84694

ADELAIDE  SA  5000