

# Complaint Form

No. \_\_\_\_\_  
(adds the Seller)

**Claimant:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Seller:** Ing. Milan Konečný – M.I.K, tax ID: 18818196 (e-shop: [www.miktoys.cz](http://www.miktoys.cz))

**Date of purchase** (according to the purchase document): \_\_\_\_\_

**Number of purchase document** (invoice or purchase receipt): \_\_\_\_\_

**Purchase order No:** \_\_\_\_\_

**Name of the complaint goods** (according to the purchase document):

\_\_\_\_\_  
\_\_\_\_\_

**Description of the defect and suggestion of the solution:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Package contents and enclosed documents:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To speed up processing of your complaint, please make sure to include a copy of the purchase receipt. Always send the complaint goods clean.

\_\_\_\_\_  
**Date and signature of the Claimant**

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*Seller commentary:*

**Receive date of the consignment/goods by the Seller:** \_\_\_\_\_

**Name and signature of the receiving worker:** \_\_\_\_\_  
\_\_\_\_\_