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Complaint Form KABAK

Customer details :

First and Last Name:

.....

Address:

.....

.....

Email:

.....

Phone Number:

.....

Date of

Purchase:.....

Product

Name:.....

Quantity:

.....pcs. each.....PLN/EUR

Total Value of the Goods

.....PLN/EUR

Description of the Defect(s):

.....
.
.....
.
.....
.
.....
.
.....

Date defects were noticed:

.....

How would you like us to resolve your complaint?

(Please select the appropriate option):

- ☐ Damage Repair
- ☐ Replacement with a new identical model
- ☐ Refund

If repair or replacement of the entire product is not possible, please refund the value of the items by bank transfer to my account:

Bank Account Number:

.....

.....
(Clear Signature of the Customer)