**Complaint Protocol**

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| --- | --- |
| **Customer**: |  |
| Name: | ...................................................................................................................................... |
| Address: | ...................................................................................................................................... |
| Telephone: | ...................................................................................................................................... |
| E-mail: | ...................................................................................................................................... |

**Supplier**: JAKAR Electronics spol. s r.o., Fryštátská 184/46, 733 01 Karviná

**Sales document number**: ............................................ Sale date: 1 …................................................

**Order Number**: ............................................................

**Labeling of goods claimed**: .................................................................................................................

Serial number: ...................................................... Serial number: ....................................................

**Description of the defect:**

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**Package contents at hand**:

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**Warning:** Always submit the product to your claim, including accessories, to avoid prolongation of the claim.

Preferred way to handle a claim:

repair: replacement:

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**Date and signature**

1 on the invoice-tax document is the date of taxable fulfillment