## ATTACHMENT NO. 1 - COMPLAINT FORM

## **Recipient:**

Peter Madár

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## **Complaint Submission**

Title, first name, and surname:	
Address of residence:	
Email address:	
Order and invoice number:	
Order date:	
Date of receipt of the goods:	
Product being complained about	
(name and code):	
Description and extent of defects in	
the goods:	
As a customer of the seller, I request	
that my complaint be handled in the	
following manner:	
I wish to receive a refund to my bank	
account (IBAN)/other method	

Date:

Signature: