Distinguished Customer, before you proceed to fill out the following of yourself with the regulations of our store available or	
	, day (Name and surname)
(Address)	IIDOD
	SMART HOME
	VOED on G o o
(Phone number)	YOER sp. z o.o.
(e-mail address)	ul. Bernardyńska 2,
	64-000 Kościan sklep@yoer.pl
	samp o journer
Complaint F (Entreprene	
I. Identification of the Advertised Product and Sales Agre	eement
Product name:	
Receipt number or VAT invoice number :/N	MAG/, dated
Price: zł (In words:	)
Date of discovering the defect of the product:	
II. Description of defects/non-conformities of the product	t with the contract
Detailed description of defects or non-conformities of the	e product with the contract:
Date of discovering defects / non-conformities of the pro	educt with the contract:
III. Description of claimant's demands*	
☐ Free repair	

☐ Exchange for a new product
In the event that the Seller refuses to bring the Product into conformity with the Sales Agreement or if the non-conformity of the Product with the agreement is significant enough to justify an immediate reduction of price or withdrawal from the Sales Agreement *:
☐ Price reduction by the amount of
☐ Withdrawal from the agreement
**mark the appropriate box "x"
IV. Other information
Address to which the repaired product should be sent and the bank account number required for a
transfer in case repair is not possible:
Signature