AGMAMITO

	(city, date)
(name and surname/company name)	
(address)	
	Complaint No.
(contact person: name, surname, telephone number, e-mail)	(completes by Agmamito)
FINAL CUSTO	MER COMPLAINT FORM
Pate of furniture purchase by the Customer:	
Pate of complaint by the Customer:	
abric purchase invoice No.:	from the day:
abric name/LOT No.:*	
<u></u>	
DEACON FOR	THE COMPLAINT/RETURN
REASONTOR	THE COMPLAINT/ NETONN
omplaint evidence (necessary condition):	
, ,, ,	furniture from a distance and a close-up of the complainted piece of
furniture) 2. Final ustomer Complaint Form	
 Scan of the purchase document of the furnit 	ture
Expected method of settling the complaint (SELECT A	AS APPLICABLE)
Payment refund	
2. Exchange of the fabric for a new one free from	om defects
IOTE: RECEIPT OF THE FABRIC IS NOT CONSIDERABLE Not the part of the basis for the basi	
	(signature)

Agmamito sp. z o.o. ul. Poznańska 33 | 62-020 Jasin, Poland T: +48 61 817 20 96 | F: + 48 818 48 46 E: info@agmamito.com NIP: 7773353201 Sąd Rejonowy Poznań-Nowe Miasto i Wilda VIII Wydział Gospodarczy KRS: 0001073883 | Kapitał zakładowy: 10 000PLN



