**COMPLAINT FORM**

**SELLER (ADDRESS):**

Moodix Market s.r.o., Rybná 716/24, 110 00 Prague 1, ID: 17970946
Registered with the Municipal Court in Prague, Section C, Insert 379466
Address for returns and complaints:
Moodix shop, 28 října 780/10, 415 01 Teplice.

**BUYER:**

**NAME /SURNAME/ TITLE:**

**ADDRESS (DELIVERY):**
**STREET:**
**CITY/ZIP/ STATE:**
**PHONE:**
**EMAIL:**

**BANK ACCOUNT (ACCOUNT/BANK CODE):**

**GOODS (NAME ACCORDING TO INVOICE):**
**INVOICE NUMBER:**

**TAX DOCUMENT (INVOICE) NUMBER:**

**PURCHASE DATE:**

**DETAILED DESCRIPTION OF DEFECT:**

**PROPOSED COMPLAINT METHOD (as per terms and conditions):**

**ON \_\_\_\_\_\_\_\_\_\_\_\_\_\_ DAY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE:**