



Postal address:

Zombie Dash sp. z o.o.
ul. Stępińska 22/30 lok. 304
00-739 Warszawa
Poland
email: zamowienia@zombiedash.pl

.....
Place, date

COMPLAINT FORM

Name, surname:

Address:

Phone:

Email address:

Product name:

Purchase date:

Date of stating the defect:

Product defect:

.....

Preferred way of dealing with the complaint:

- Repair
- Exchange
- Return of the sum paid for the items of to the account:

Bank name:

Account No.:

To this complaint form, I enclose the following attachments:

1. Copy of the cash register receipt
2.

.....
Customer's signature