RECLAMATION FORM RECLAMATION NO:



SUPPLIER:	CUSTOMER:
BUSHMAN – e-shop	FIRST / SURNAME STREET / No. POSTCODE / TOWN PHONE E-MAIL
DATE OF PURCHASE: DATE OF CLAIM:	
WHAT'S BEING SENT BACK:	
NAME:	PRODUCT CODE:

COLOUR:		SIZE:	INVOICE No. DL:	
STORE WHERE		PRICE:	RECEIPT No:	
PURCHASED:				
DESCRIBE THE DEFECT YOU'VE FOUND:				
SUGGESTED METHOD OF RESOLUTION:				

After the complaint has been settled, the seller will notify the buyer of the termination of the complaint by telephone, SMS or E-mail. If for any reason you do not receive an SMS or E-mail within the statutory one-month period, you can automatically come to pick up the goods. **The complainant is obliged to pick up the item no later than one month from the expiration of the time when the complaint should have been settled.** I acknowledge that the administrator of my personal data is the company Bushman s.r.o., IČ: 25618601, with its registered office at Lazarská 1719/5, Prague 1. I may revoke my consent to the processing of my personal data in writing to this data administrator. More information on 'EU and Council Regulation (EU) No. 2016/679' of 27 April 2016 can be found on the website en.bushman.eu or by asking via the e-mail address of the data controller: <u>service.en@bushman.eu</u>.

SIGNATURE OF CLAIMANT

METHOD OF COMPLAINT:	STAMP AND SIGNATURE OF STORE:
DATE OF COMPLAINT:	

COMPLETED BY LP Komfort s.r.o.					
INVOICE	Č. DL	D	ATED:	DISCOUNT:	
No:					

POSTUP REKLAMACE:		CENTRAL COMPLAINT REGISTRATION NUMBER :	
REGD OFFICE: Bushman s.r.o.	SERVICE ADDRESS: Bushman s.r.o.		
Lazarská 5/1719 110 00 Praha 1	Městečko 75 257 22 Čerčany	STAMP AND SIGNATURE OF ESTABLISHMENT:	
TAKEN OVER BY RECLAIM CUSTOMER ON	ING		