

# CLAIMS FORM

Please send the damaged goods to this address: Freshlabels, Stanova 2, Teplice 415 01. Do not forget to attach this form (printed) and a copy of the tax invoice (bill) and we will send you an email with confirmation as soon as it arrives. Before you know (the legal deadline is 30 days but we are also not a fans of waiting, so we will try to be faster), you'll get a message from us containing the outcome of the claim with the next steps.

First name and surname: .....

Address: .....

Phone number: .....

Email: .....

Order or invoice number: .....

Description of the defect:

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Please circle your preferred way of settling the complaint:  
(we try to make the most of our efforts, but we also have to look at the provisions of the Civil Code)

Repair of the goods      x      Replacing of the goods      x      Money refund

Date: .....

Signature: .....