



**P.A.T. BUGAŁA sp.k.**

ul. Legionów 98  
42-200 Częstochowa  
POLAND  
NIP: 5730207288

# COMPLAINT FORM

Date: \_\_\_\_\_

|  |
|--|
| Name of the company and invoice address: |
| VAT No.:                                 |
| Tel.number:                              |
| E-mail                                   |

|                             |
|-----------------------------|
| Delivery address :          |
| Name, surname and signature |

***Complaint should be made within 14 days of receipt of the goods.  
Please send it to the company's address with the note "COMPLAINT - warehouse G".***

| No. | Symbol | Quantity<br>(pcs.) | Invoice number | Description |
|-----|--------|--------------------|----------------|-------------|
| 1   |        |                    |                |             |
| 2   |        |                    |                |             |
| 3   |        |                    |                |             |
| 4   |        |                    |                |             |
| 5   |        |                    |                |             |
| 6   |        |                    |                |             |
| 7   |        |                    |                |             |
| 8   |        |                    |                |             |
| 9   |        |                    |                |             |
| 10  |        |                    |                |             |

Notes: