



Česká pošta, s.p., Praha 1, Politických vězňů 909/4
PostFila – Czech Post Philatelic Service,
Ortenovo nám. 542/16, CZ-170 24 Praha 7
e-mail: postfila@cpost.cz

Claim form

I/We(*) inform you that I/we want to file a defective product claim for products delivered under the contract for sale of these products:

Order form dated:

Reason for claim:
.....

Method of compensation:

Return of payment for the defective products / **Delivery of perfect products**

The Buyer (to be completed by the Buyer - the sections in bold frame are obligatory details):

Surname (or business name of legal entity):

Name (or surname, name and title of representative of legal entity):

Residential address, registered office:

Street, house No.:																			
Municipality																		Postcode	
Country:																			
Company reg. No. (IČO):																		VAT No. (DIČ):	

Contact:

Phone:																			
Email address:																			

In on

Signature of the Buyer
(signature only if this form is sent in paper form)