

**You need:**

- 1. Personal delivery or by mail
- 2. Form

## RECLAMATION RECORD

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**INFO OF THE THE OWNER OF THE INSTRUMENT:**

NAME: \_\_\_\_\_

SURNAME: \_\_\_\_\_

STREET: \_\_\_\_\_

RESIDENCE AND POST NUMBER: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

TEL: \_\_\_\_\_

**WARRANTY (circle):**      **YES**              **NO**

**INFORMATION ABOUT OF THE INSTRUMENT**

BRAND: \_\_\_\_\_

MODEL: \_\_\_\_\_

SER. NUMBER: \_\_\_\_\_

DATE OF PURCHASE: \_\_\_\_\_

**ATTACHED DOCUMENTATION (circle):**      **RECEIPT**              **WARRANTY PAPER**

**DEFAULT DESCRIPTION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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