

**Claim form**

Dear Client,

In case of dissatisfaction with the services or complaints, please fill up the enclosed form. Send the form to the following email address: [complaint@biteffect.net](mailto:complaint@biteffect.net) or by post to B-Efekt a.s., Husitská 853/13, 130 00 Prague

Name, surname:

Represented company:

Address of permanent residence / registered office:

Contact Phone Number:

Contact e-mail:

Client registration number in Biteffect system:

Description of the situation / payment transaction that is the subject of the complaint:

Date and time of occurrence of the situation / payment transaction that is the subject of the complaint / claim:

Additional information related to the subject matter:

How do you propose to solve this situation?

Date: