



Warranty Form No. _____ *(filled by leg&go)*

IMPORTANT

Please fill in all blanks to receive warranty

Submission date: _____

Full name: _____

Address: _____

City: _____

Postal code: _____

Country: _____

E-mail: _____

Phone number: _____

Seller: leg&go webshop Invoice No.: [LG-XXXX-XX] _____

leg&go dealer Store name: _____

other Store name: _____

Damaged product: _____

Purchase date: _____

Broken part: _____

Damage description: _____

Cause description: _____

Images: *Please add photos to your e-mail.* _____