



SIGMA-ELEKTRO GmbH
Dr.-Julius-Leber-Straße 15
D-67433 Neustadt

SIGMA SPORT CLAIM

Only submissions from Europe

Date _____

First name _____

Name _____

Street _____

Postal code / city _____

Country _____

Phone _____

Mobile _____

E-mail _____

Fax _____



SIGMA SPORT CLAIM

Only submissions from Europe

Product _____

Error description

Attachment

Devices

Single components

Copy of receipt

Date of purchase _____

Note:
Copy of receipt is necessary to check the warranty.