

COMPLAINT TO THE OPERATOR REGARDING INVOICING

Company	Name of operator	
	Address	Postal code and city
Object of invoicing?	Telephone line/ number Broadband connection/ account name Other connection	
Reason for the complaint	Date of the invoice	
	Reference number	
	Due date	
	Balance due €	
	Itemised invoice requested (date) Itemised invoice received (date)	
	<input type="checkbox"/> I have paid the undisputed part of the invoice, €	
	Description of the error	
Claim	The invoicing dispute must be sorted out / the invoice must be corrected	
	Compensation for the financial costs arising from the invoicing dispute / incorrect invoice	
	_____ € in travel expenses	
	_____ € in telephone expenses	
	_____ € other expenses, specify _____	
	_____ € total	
Claimant	Name	
	Address	Postal code and city
	Telephone	E-mail
	Bank and account number to which compensation is to be paid	
Date	Time and place	

I expect a response within two weeks.