

# REUBEN

F . S C A R F

## CLAIM FORM

\* mandatory field

Full Name (as listed on your order) *	
Order Number*	
Order Date*	
Phone Number or Email (as listed on your order) *	
Preferred Contact Number or Email (if different)	
The item(s) that you wish to return/exchange*	
Reason for the return/exchange*	
Alternative size or colour (exchange only)	
Any other comments	

Has the item been opened?  Yes  No

Has the item been worn?  Yes  No

Is the swing tag(s) still attached?  Yes  No

Has the item been tailored or altered in any way?  Yes  No

**Please attach photos if you are claiming for a damaged item**

Email this form and the photo(s) to [reubenscarfonline@gmail.com](mailto:reubenscarfonline@gmail.com)

Or post this form and photo(s) to: **Unit 2/12 Bernera Road Prestons NSW 2170**