

Credit Claim Request



Dr Neil's
Pet and Equine
Supplies Pty Ltd

Date: _____ Business Name: _____

Contact Person: _____ Phone Number: _____

Address: _____

Invoice Number: _____ Date of Order: _____

Please tick the appropriate box

Returning Other Stock Returning Damaged Stock

If you ticked 'Returning Other Stock', please give a reason why the stock is being returned:

Ordered Incorrectly Sent Incorrectly Other

Other: _____

Product, Code and Quantity

	Product	Code	Quantity
1)			
2)			
3)			
4)			
5)			
6)			
7)			
8)			
9)			
10)			

Return Details - Boxes only, envelopes not accepted

Box Dimensions: _____

Number of Boxes: _____ Weight of Boxes (approx): _____

* Boxes must be addressed to: Dr Neil's Pet and Equine Supplies. 146 Glendenning Rd, Glendenning, NSW, 2761

Office Use Only

Date Received: _____ Comments: _____

Date Actioned: _____

Claim/Credit Number: _____

Processed By: _____