

Strathnairn Arts

Tel: 02 6254 2134
ABN: 31 432 150 630

RETURN AUTHORISATION FORM PLEASE ATTACH THIS COMPLETED FORM WITH YOUR RETURN

Customer Details:

INVOICE/ORDER #	<input type="text"/>
SURNAME/COMPANY	<input type="text"/>
FIRST NAME	<input type="text"/>
CONTACT NUMBER	<input type="text"/>
EMAIL ADDRESS	<input type="text"/>

We will contact you once the returned goods are received to determine your return request option. Alternatively, please tick one of the following:

<input type="checkbox"/> Replacement	<input type="checkbox"/> Store Credit	<input type="checkbox"/> Refund	<input type="checkbox"/> Exchange
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Reason for Return:

ITEM	QTY

Return Address:

⇒ Strathnairn Arts
90 Stockdill Dr
Holt ACT 2615
AUSTRALIA

Terms and Conditions: Are as published on www.strathnairn.com.au