

Leslie Hand Painted Glass

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Claim Form

Thank you for your order. Our goal is for your purchases to be received in perfect condition. If there are any problems with this shipment please complete this form and fax or mail it to us as soon as possible. All claims must be received within 15 days of shipping.

Invoice Date: _____ Invoice # _____

Business Name: _____

Shipped To: _____

Contact: _____

Fax: _____ Phone: _____

Please Select The Nature Of Your Claim:

Damaged

Item # of Damaged Goods: _____ Quantity: _____

Nature of Damage: _____ Comments: _____

How would you like this rectified? Replacement: _____ Open Credit: _____

Missing

Item # of Missing Goods: _____ Quantity: _____

Comments: _____

How would you like this rectified? Replacement: _____ Open Credit: _____

Wrong Item

Item # Ordered: _____ Item # Received: _____

For items received in error, a call tag will be sent to you. We will ship the correct item upon receipt of the returned shipment.

We are only responsible for breakage that occurs with orders shipped through UPS.