

DERNI PTY LTD A.C.N. 084 420 548 / A.B.N. 41 002 263 872
 For MARION SUPERSTORE PTY LTD A.C.N. 126 765 399 / A.B.N. 21 233 734 130
 trading as

HARVEY NORMAN FACTORY OUTLET

309 South Road
 Mile End SA 5031
 Phone: 08 8150 8045 Fax: 08 8150 8065

TAX INVOICE

SUPPLIER'S COPY

11/11/14 09:37:04 305
 Contact : 31 CCARUSI
 Supplier # : 510708
 Franchisee # : 30588
 Fran : 060

Invoice # : 2005826
 Invoice Date: 16/10/14
 Freight \$: 2.75

Dear Sir/ms,

We claim a credit to our account in respect to the matter detailed below.
 PLEASE NOTE THAT YOU HAVE UNTIL 10/01/15 TO REJECT THIS CLAIM,
 OTHERWISE IT WILL BE CONSIDERED FINALISED IN OUR FAVOUR.

Reason for our claim: CLAIM-RETURN FOR CR R.A. No:
 Notes: FAULTY ITEM

Product Code	Description of Goods	Qty	Price
RXV475B	YAMAHA 5.1 5X115W AV RECVR	1.00	275.00
	FLOOR STOCK		
	S/N 21Y1242930Q		
	NOISE IN REAR SPEAKER		
	FAULTY ITEM		

A.B.N. No : 41 002 263 872
 G.S.T. \$: 27.50
 TOTAL CLAIM \$: 302.50

Raised by: _____
 Authorised by: _____

PACKED	Quantity	By	CHECKED	Quantity	By
Carrier	Company	Con Note No	Drivers Signature		
Drivers	Name	Veh reg	Date		

EOE.
 V2014.9

FAULTY STOCK RETURNED
TO WAREHOUSE

MODEL: RXV 475B

SERIAL: 21412429309

BRAND: Yamaha

DESCRIPTION: AV Receiver

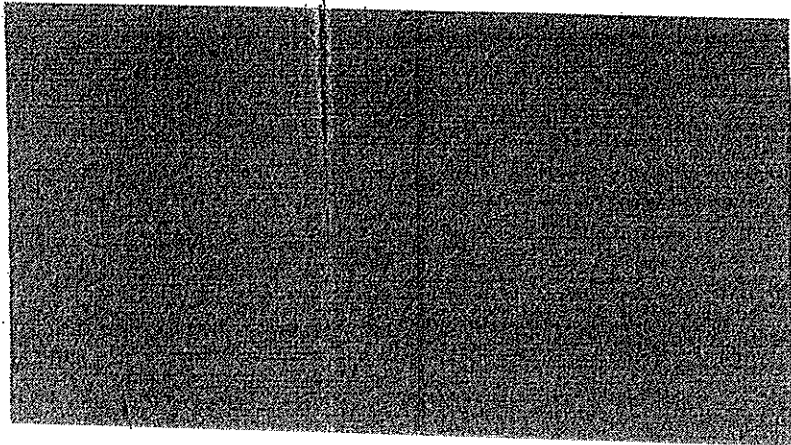
FAULT: Noise in Rear Speakers

CUSTOMER INVOICE # Floor Stock

DATE RECEIVED

STOREMAN/SALESPERSON

POS BATCH STICKER



PLEASE READ BEFORE COMMENCING

TO COMPLY WITH OUR GOODS RETURN AUTHORITY (GRA) REQUEST POLICY PLEASE COMPLETE BOTH PAGES, ENSURING YOU HAVE READ AND UNDERSTAND THE TERMS & CONDITIONS. IF YOU DO NOT HAVE A COPY OF THESE TERMS & CONDITIONS PLEASE CALL 1300 661 977 AND IT WILL BE FAXED TO YOU. IF THIS PAPERWORK IS NOT COMPLETED OR IS INACCURATE, THIS MAY RESULT IN YOUR GRA REQUEST BEING REJECTED.

STEP 1

store name	H A R V E Y N O R M A N	branch name	F A C T O R Y O U T L E T	contact person	C A R U S I	phone number	08 - 8150 - 8045	replacement order number	
model number	R X V 475 B	serial number (compulsory)	21412429300	yamaha invoice number	2005826	yamaha invoice or customer purchase date	16 / 10 / 14	claim number	777009
claim date	11 / 11 / 14								

STEP 2

REASON FOR RETURN REQUEST - (please tick one, provide full details and discuss with your Yamaha Sales Manager)

- | | |
|--|------------------------|
| <input type="checkbox"/> 1. DAMAGED IN TRANSIT / DEAD ON ARRIVAL | under 2 weeks old |
| <input checked="" type="checkbox"/> 2. FAULTY - Display model | under 2 weeks old |
| <input type="checkbox"/> 3. FAULTY - Customer purchase | under 2 months old |
| <input type="checkbox"/> 4. FAULTY - 3rd time (two verified services by Authorised Yamaha Service Agent) | within warranty period |

DESCRIBE NATURE OF FAULT - compulsory

Noise in Near Speaker

DESCRIBE TESTS PERFORMED TO VERIFY FAULT - compulsory

Tested in Store

- ☐ 5. YAMAHA SALES MANAGER NOMINATES RETURN

