

DERNI PTY LTD A.C.N. 002 263 872 / A.B.N. 41 002 263 872
 For Rascie Pty Ltd A.C.N. 068 445 107 / A.B.N. 88 112 398 395
 trading as

HARVEY NORMAN AV/IT Superstore PORT MACQUARIE

160-174 HASTINGS RIVER DRIVE

PORT MACQUARIE NSW 2444

Phone: 02 6580 0000 Fax: 02 6580 0093

TAX INVOICE

CREDIT CLAIM 2622657

YAMAHA MUSIC AUSTRALIA PTY LTD

PO BOX 268

SOUTH MELBOURNE 3205

Phone : 1300661977

Fax : 1800331119

STORE COPY

14/09/14 11:55:31 38

Contact : 45 Kayla

Supplier # : 510708

Franchisee #: 3860

Fran : 060

Invoice #: 1979998

Invoice Date: 16/04/14

Dear Sir/ms,

We claim a credit to our account in respect to the matter detailed below.

PLEASE NOTE THAT YOU HAVE UNTIL 13/11/14 TO REJECT THIS CLAIM,
 OTHERWISE IT WILL BE CONSIDERED FINALISED IN OUR FAVOUR.

Reason for our claim: CLAIM-RETURN FOR CR R.A. No: 0
 Notes: FAULTY - RETURN FOR CREDIT

Product Code	Description of Goods	Qty	Price
MCRB142BLK	YAMAHA CD MICRO SYSTEM BLK INV1979998 +41141125 X1 HNOPS3330 S/N Y546033XZ	1.00	317.55

A.B.N. No : 41 002 263 872

G.S.T. \$: 31.76
 TOTAL CLAIM \$: 349.31

Raised by: _____ Authorised by: KAYLA

Adjustment to Stock Done ? : _____

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

E&OE.
 V2014.06

faxed 19/9

Rascie Pty Ltd A.C.N 068-445-107 / A.B.N 88-112-398-395
trading as

Harvey Norman Computers

160-174 Hastings River Drive Port Macquarie NSW 2444
Phone : 0265800034 Fax : 0265800076

TAX INVOICE

INVOICE REPRINT 829090

1/08/2014

MR RON COOKE

Assist: KAYLA

Cust #: 65822255

,, 2444

Stype : CASH ON DELIVERY

Product	Qty	Price	Total
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MCRB142BLK	1	\$419.95	\$419.95
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YAMAHA CD MICRO SYSTEM BLK

* TAKEN * on 01/08/14

MCRB142BLK	-1	\$419.95	\$419.95
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YAMAHA CD MICRO SYSTEM BLK

* RETURNED * on 04/08/14

Y546033XZ

Power shuts off immediately after
turning on

GST Content	\$0.00
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Total:	\$0.00
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YAMAHA

Yamaha Music Australia Pty. Ltd.
 ABN 84 004 259 527
 1 / 99 Queensbridge Street
 Southbank, Victoria, 3006

REQUEST to RETURN STOCK or CLAIM CREDIT

DATE:

14 09 2014

STORE NAME:

YOUR REFERENCE or CLAIM No.:

2622657

CONTACT PERSON:

KAYLA

PHONE:

02 6580 0043

MODEL No.:

MCRB142BLK

SERIAL No.:

Y546033XZ

YAMAHA INVOICE No.:

1979998

YAMAHA INVOICE DATE:

16 04 2014

REPLACEMENT ORDER No.:

REASON FOR RETURN REQUEST or CLAIM for DFSA

Yamaha Sales Manager and obtain signature if required. Refer to YAMAHA AVIT GOODS RETURN & CREDIT CLAIMS POLICY for details.

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1. INCORRECT GOODS SUPPLIED

Requests accepted until 2 weeks after receipt of goods

☐

2. DAMAGED IN TRANSIT / DEAD ON ARRIVAL

Please provide FULL details in text box below

☐

3. SHOP STOCK, FAULTY, UNDER 2 MONTHS* OLD

Please provide FULL details in text box below

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4. CUSTOMER STOCK, FAULTY, UNDER 2 MONTHS* OLD

Please provide FULL details in text box below

☐

5. CUSTOMER STOCK, FAULTY, ALREADY REPAIRED TWICE under warranty

☐

6. YAMAHA AVIT SALES MANAGER

NOMINATES RETURN Sales Manager: Please provide reason in text box below & sign

1/2/3. OPTIONAL: I will KEEP the GOODS in EXCHANGE for INCORRECT STOCK ALLOWANCE or DAMAGED / FAULTY STOCK ALLOWANCE (DFSA). Yamaha will repair the goods under warranty if required. (tick here—discuss DFSA % rate with Yamaha Sales Manager, both parties sign below)

4. COPY of CUSTOMER'S PURCHASE RECEIPT MUST BE FAXED WITH THIS FORM (sign below)

5. COPY of REPAIR HISTORY MUST BE FAXED WITH THIS FORM (sign below)

6. The Yamaha Sales Manager nominates the return to be approved (sign below) OR The Yamaha Sales Manager APPROVES this % CREDIT AMOUNT for DFSA or Incorrect goods supplied: %

SIGNED (Yamaha Sales Manager):

WHAT IS THE NATURE OF THE FAULT? Describe tests performed to verify fault:

Power shuts off after turning on.

1. Products can only be returned under the guidelines stipulated in the Yamaha Goods Return Policy dated 13/9/2004. 2. Please allow 5 working days to process your request. Do not attempt to return goods without approval—the product will be returned at your expense. 3. Only requests faxed to 1800 331 119 will be considered for return.

*2 calendar months

YAMAHA USE ONLY V1, 13/9/04

Date received: / /

Details & serial number history check by (Initial): GRA No:

MANAGEMENT APPROVAL: / /

I am authorised to act on behalf of the store named on this form, I have read the Yamaha policy on Stock Returns & Credit Claims dated Sept 13th, 2004 and I hereby submit my request to return stock or request a % credit claim

SIGNED (store representative):

FAX TO
1800 331 119