

REPAIR CREDIT REQUEST FORM

Please fill in the Information below and fax or mail this form along with your repair bill and Images to the address or fax number above or e-mail the required information to your Customer Service Representative for all credit processing.

Please refer to your **Hughes Furniture Industries, Inc. / Motion-Eaze Recliners Policy** (Customer Repair Time Allowances), for approved amounts to be allowed. Please submit pictures of any damages on the credit request, for consideration of approval. This will also be used for quality control purposes.

After Hughes Furniture Industries, Inc. / Motion-Eaze Recliners receive all information needed, the claims will be approved or denied per information given. Approved claims will be sent a Credit Memo, which may be used by deducting from your invoices.

Customer Name / Company Name: _____

Original Invoice number product purchased on: _____ and/or ACK# _____
and/or your PO# _____.

Date of Purchase from Hughes Furniture Industries, Inc. / Motion-Eaze Recliners: _____

Style # _____ Fabric Name: _____

Description of Damage:

Description of Repair Completed:

Time taken for repair: _____

Any unauthorized deductions taken over the credit approved (Credit Memo) amounts will be billed back to the customer.