

CLAIM FORM BBHUGME PRODUCT

Claim Form In order to evaluate the complaint, please fill out this bbhugme Claim Form. Try to explain in detail , as well as adding images illustrating the problem. <i>If you have purchased the bbhugme product through a retailer, please contact the point-of-purchase.</i>				
YOUR INFORMATION	Full name:		Phone:	
	Address:		E-mail:	
	Postal code:		City:	
	Country:			
	Order number:			
PRODUCT	Product	bbhugme Pregnancy Pillow + Colour: _____ bbhugme Nursing Pillow + Colour: _____ bbhugme Maternity Support Belt bbhugme Cover (Pregnancy Pillow) + Colour: _____ bbhugme Cover (Nursing Pillow) + Colour: _____ bbhugme Pebbles + Colour: _____		
	Production batch no: Inner-pillow label, starting with PO XXXX:			
	Purchase date AND Order number			

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DESCRIPTION OF CLAIM	Please provide detailed description of problem:	
	Inner-pillow: Has it been machine washed?	
	Cover: Has it been tumbled dry, bleached or machine washed over (40°C/104°F)?	
	Maternity Support Belt: Has it been tumbled dry, bleached or machine washed over (30°C/86°F)?	
SIGNATURE:	Date / Signature:	