

## CLAIM FORM BBHUGME PRODUCT

<b>Claim Form</b> In order to evaluate the complaint, please fill out this bbhugme Claim Form. Try to <b>explain in detail</b> , as well as <b>adding images</b> 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	<input type="checkbox"/> bbhugme Pregnancy Pillow + Colour: _____ <input type="checkbox"/> bbhugme Nursing Pillow + Colour: _____ <input type="checkbox"/> bbhugme Maternity Support Belt <input type="checkbox"/> bbhugme Cover (Pregnancy Pillow) + Colour: _____ <input type="checkbox"/> bbhugme Cover (Nursing Pillow) + Colour: _____ <input type="checkbox"/> bbhugme Pebbles + Colour: _____	
	Production batch no: Inner-pillow label, starting with PO XXXX:		
	Purchase date AND Order number		

## CLAIM FORM BBHUGME PRODUCT

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