



To expedite and ensure credit please complete this form and fax to 718-458-3124 or email this form back to us inside.sales@faunafoods.com

DATE: ____/____/____

(Please Print)

CONSUMER INFORMATION

(1) Item _____ Item Description and Code Date _____

Consumer Name _____ Phone# _____

(Please Print)

Address & City _____ State _____ Zip _____

Reason For Return:

Pet did not like the product Pet got sick Pet is allergic to the product Other, Explain:

(2) Item _____ Item Description and Code Date _____

Consumer Name _____ Phone# _____

(Please Print)

Address & City _____ State _____ Zip _____

Reason For Return:

Pet did not like the product Pet got sick Pet is allergic to the product Other, Explain:

(3) Item _____ Item Description and Code Date _____

Consumer Name _____ Phone# _____

(Please Print)

Address & City _____ State _____ Zip _____

Reason For Return:

Pet did not like the product Pet got sick Pet is allergic to the product Other, Explain:

No return of any type can be accepted without a credit slip