

Product Refund Request

Your Details: (Please print clearly)

Name: _____

Business Name: _____

Industry/Business/Profession: _____

Address: _____

State: _____ Post code: _____ Mobile: _____ Phone: _____

Fax: _____ E-mail: _____ (your email is secure with us and will never be rented or sold)

Product or Service Purchased: _____

Purchase Date: ____/____/____ Amount Paid \$: _____

Could you please describe why the product did not work for you?

Could you please provide any feedback on how we can improve our product?

I request that my refund be processed to the following account*:

Account name: _____ Bank: _____

B.S.B: _____ Account Number: _____

I am returning the Product(s) as per the relevant Product guarantee. By signing this form I am declaring the above information to be true and correct.

Full Name: _____

Signature: _____ Date: ____/____/____

Please return this form by faxing to 07 55279677 or email:

Customers@CrocodileMarketing.com

Or mail to: Crocodile Marketing PO Box 4483, Ashmore Plaza, Ashmore, Qld 4124

For Office Use Only

Refund Authorisation No: _____ Auth.by: _____

Signed: _____ Date: ____/____/____ Pack Returned: ____/____/____