		DAMAGE / ISSUE REPORTING FROM
		Please fill out this form in its entirety and attach all required photo before returning it to Alphastone Inc.
		Failure to do so will lead to delays in the processing of your claim.
		Customer Name:
		Address: Phone number: Invoice Number:
		List Damaged Items Below
		* Two (2) photos of each item <u>must be attached</u> ,
		one (1) wide-angle and one (1) close up.
	Cabinet / item code	Description of the issue
ITEM 1		
ITEM 2		
ITEM 3		
ITEM 4		
ITEM 5		
ITEM 6		
ITEM 7		
ITEM 8		
17514.0		
ITEM 9		
ITEM 10		
ITEM 11		
		Send this form and all above photos to Alphastone17@Gmail.com