



RETURN AUTHORISATION FORM

RA NUMBER (we will supply you this number via email)

Buyer Contact Details:

Name: _____

Address: _____

Email: _____

Daytime Phone Number: _____

Date Of Purchase : _____

Order Details: _____

Description of faults or reason for return : _____

SIGNATURE : _____

Date : _____

Please send this form and item(s) to:

MYBARGAINAUSTRALIA

PO BOX 3103

WILLOUGHBY NORTH NSW 2068