

# Missing Item or Wrong Item Claim Form

Please fill this form out in its entirety and attach all required photo before returning it to Wholesale Cabinetry. **Failure to do so will lead to delays in the processing of your claim.**

Company Name:

Contact Name:

Sales Order / Invoice #:

Shipping Address:  
(for replacements)

## List Missing Items Below

Item 1

Item 2

Item 3

Item 4

Item 5

Item 6

Item 7

Item 8

Item 9

## If you received incorrect items please list them below

Wrong Item 1

Wrong Item 2

Wrong Item 3

Wrong Item 4

Wrong Item 5

Wrong Item 6

Wrong Item 7

Wrong Item 8

Wrong Item 9

**\*Send this form to [csr@warehousedistributorsusa.com](mailto:csr@warehousedistributorsusa.com)**

We endeavor to have replacement parts leave our warehouse within 48 hours of receiving the above required information. Please follow our mandatory receiving requirements which are included with every tracking number.