Morgan Grant

SERVICE REQUEST FORM

1. Please complete the form in its entirely. Remember to make a copy for your records.

2. Place the merchandise in a secure mailing box. Ensure that the merchandise is properly protected with the necessary amount of padding for your merchandise.

3. Ship via United States Postal Service or any mailing service to the address below. Insure the merchandise to your statisfaction.

CUSTOMER INFO.	NAME:	DATE:
	ADDRESS:	PHONE:
MER		EMAIL:
\$TOI	CITY:	
CUS	STATE: ZIP CODE:	
	I was reasist. Margan Crant will notify you that we have reasized you	r marshandiae. Our proference is to petitivuou bu empil es
ст	Upon receipt, Morgan Grant will notify you that we have received your merchandise. Our preference is to notify you by email so that you receive notification efficiently. May we send the correspondence to your email address above?	
CONTACT	Yes No	
CO	If no, preferred Contact Method:	
	1 Approximate data of purchase.	
	Approximate date of purchase: 2. Was the merchandise previously serviced by Morgan Grant? if so, when?	
	2. Was the merchandise previously serviced by Morgan Grant? If so, v	when?
ST		
QUE	3. Describe the condition of your merchandise as completely as possible. Include specific information like - damage to a gemstone, a loose gemstone setting, or a problem with the clasp. Be as detailed as possible.	
ORDER REQUEST	gemstone setting, or a problem with the clasp. Be as detailed as possi	
DER		
OR	4. Type of service request: Alteration Cleaning & Polishing Repair	
	5. Describe your service request. Please be as specific as possible.	
NO	ADDITIONAL INSTRUCTIONS: Use this space for any additional comments	
INSTRUCTION		
TRU		
SNI		
	Cut the line below to use as a mailing label	
	Cut the line below to use as a mailing label — — — — — — — — — — — — — — — — — — —	
		MILES BERNARD, INC.
		115 WEST 45 [™] STREET
		NEW YORK, NEW YORK 110036