



DISPLAY CLAIM FORM

(FOR ALL MANUFACTURERS)

Claim forms **MUST** be submitted by the MHD direct buying customer **ONLY**. If you do not have a current, valid MHD account your claim will not be honored. Please utilize one form per display location. Claims must be filed within 60 days of installation. *All fields are required.*

Date: _____ MHD account number: _____

This claim is filed for the live burn display(s) at the following retailer. (A separate form must be filed for each retailer location): Retailer Name: _____

Address: _____

City: _____ State: _____ Zip/Postal Code: _____

Contact: _____ Phone: _____

Date of installation: _____

MODEL NUMBER	MHD INVOICE	SERIAL NUMBER	COST*	AMOUNT
CLAIM TOTAL:				

Please email this form and a picture of your display to:

Nbroumpton@majestichearth.com

Claims submitted without appropriate documentation will be denied.

MHD reserves the right to make changes to the display program at any time without notice.