

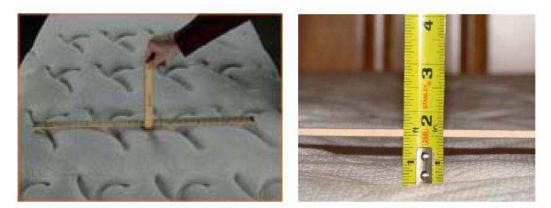
Claim#_____(if previously provided)

Bedding Claim

Name:		
Best Contact numb	er:	
Phone number (s)	we would have on your account:	
Address:		
City:	State:	Zip:

Please explain your concern with your mattress:

In order to process your claim we will need pictures illustrating your concerns. If your concerns are body impressions, place a straight edge (like a yardstick or broom handle) across the area. Using a ruler, measure the depth of the depressed area, without applying any pressure and then photograph the measurements. Please be sure to measure in the middle of the quilted area, not the stitching.



Please notate the deepest depression measurements here:

What brand is the mattress?

What brand is the box spring?

Has either been ever been replaced?



Please email pictures, claim form, and proof of purchase if available to <u>Bedding.claims@nfm.com</u>. Please limit the size of each email to no larger than 9 megabytes. If multiple emails are sent please be sure to clearly reference your information on each one.

If you are unable to email this information please mail it to

Nebraska Furniture Mart

Dept 02352

 $700 \text{ s} 72^{\text{nd}} \text{ st}$

Omaha, Ne 68114

If neither of these options work for you please give our Customer Care department a call at

1-800-359-1200 and we will be more than happy to help!