



MILLWORK DISTRIBUTORS, INC.
Employee Owned and Operated

OFFICE USE ONLY	
Date:	_____
Memo No:	_____
Tran. No.	_____
Credit Amount:	_____

Product Inspection Form

Today's Date: _____

Dealer Name: _____

City: _____

Original Invoice #: _____
(if available)

Invoice Date: _____

Replacement Invoice #: _____
(if available)

Invoice Date: _____

P.O. # _____

Product Returning

(Office Use)

Qty	Size	Description	Item #

Stock Item? Yes No

Restock Charge? Yes No

Restock Charge Percentage: 20%

Reason for Return: _____

Person Authorizing Return: _____

Pick Up & Return to Vendor

Pick Up & Return - No Credit

Credit Only

Pick Up & Return to Stock

Pick Up & Other _____

Note - Salesperson must attach a copy of this form along with a sticker to the product being returned to insure timely and proper credit. Completion of this form is a request for return and does not guarantee a return of the merchandise in question.

- All requests are subject to the return policies of Millwork Distributors, Inc.
- Salesperson must forward copy of this form to office for RMA ticket to be generated.
- MDI cannot be held responsible for product returned without an RMA Ticket.