



Return Authorization

This form must be filled out by the purchasing dealer

Dealer: _____ Date: _____

City: _____ Written By: _____

Contact: _____ Approx. Date of Original Order: _____

Phone #: _____ Original MWC Sales Order # _____

Fax #: _____ Item # _____

Owner: _____ "Ship To" Address: (required if shipping) _____

Address: _____ Address: _____

City/ST/Zip: _____ City/ST/Zip: _____

Site Phone #: _____ To Who's Attn: _____

Work Phone #: _____

Reason for Return: _____

Mark & Circle Appropriate Items: Aluminum Door Aluminum Window

Glass Lock Track Water Screen

Hinges Strike Rollers Handles Vinyl/Mohair

Other: _____

MWC Sales Dept. Authorization Signature _____ Date: _____

MWC Received By: _____ Date: _____

PLEASE NOTE: ALL Materials MUST have an authorized MWC signature or Materials will not be accepted. Any and all materials dropped off without authorization will be scrapped immediately. Attach additional sheets if needed for description.