



Providence Pipe Products, Inc.

8491 Sunset Blvd. # 568 W. Hollywood, CA 90069

Tel: (562) 803-1273 Fax: (562) 803-0376

RETURN GOODS AUTHORIZATION

Company \_\_\_\_\_

Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Date: \_\_\_\_\_

City/State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

PICK-UP

Table with 6 columns: ITEM NO., ITEM CODE, DESCRIPTION, QUANTITY, UNIT PRICE, TOTAL PRICE. Rows 1-5.

REASON FOR RETURN

DATE OF PULL-OUT: \_\_\_\_\_

Table with 2 columns: ITEM NO., REASON. Rows 1-3.

NOTE: This is not a credit. Credit will be issued upon inspection and receipt of the material

PLEASE INDICATE WHAT YOU WOULD LIKE US TO DO BY CHECKING APPROPRIATE BOX BELOW:

- EXCHANGE FOR OTHER MERCHANDISE (LISTED BELOW)
ISSUE CREDIT MEMO/REFUND
DAMAGED, REPLACE
PRODUCT PROBLEM, REPLACE

Table with 6 columns: ITEM NO., ITEM CODE, REPLACEMENT MERCHANDISE, QUANTITY, UNIT PRICE, TOTAL PRICE. Rows 1-3.

INITIAL: \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE

FOR TRUCKING USE ONLY

Name of Carrier \_\_\_\_\_

Reference No. \_\_\_\_\_

Destination 12310 WOODRUFF AVENUE, DOWNEY, CA. 90241

Table with 6 columns: Handling Units No. Type, Packages No. Type, Kind of Package, Description of Articles, Special Marks and Exceptions (Subject to correction), Weight Subject to, Class or Rate Ref. Correction, Cube (Optional) For Info Only.

Carrier Certification

Carrier acknowledges receipt of packages or pallets.

Driver Signature \_\_\_\_\_ Full Name \_\_\_\_\_

Pieces \_\_\_\_\_ Pallets \_\_\_\_\_ Date \_\_\_\_\_

Shipper Load and Count? Yes No CUSTOMER INITIALS \_\_\_\_\_