



209 N. 4th Avenue
P.O. Box 177
St. Nazianz, WI 54232

Phone: 920-773-2143
Fax: 920-773-2724
Email: shipping@rbrauninc.com

RETURN / REPAIR

Supplier Name: Outpatient Control

Today's Date: 3-13-23

Reason For Return (RFR)					
Defective	D	Warranty	W	Exchange	E
Customer Req. Wrong Part	R	Shipped Wrong By Supplier	S	RBI Ordered Wrong	O
Other:	X	Cores	C	Not Needed	N
Returning Via:		Return Shipping Charge:		Restocking Fee: Yes / No Percentage:	
Instructions To Process/Notes: <u>Screens won't fit in Guide Frame</u>					

VENDOR INFO	
Vendor Contact	
RMA #	
Vendor Invoice #	

RBI INFO	
Return Requested By	
Reason For Return	
Shipped Back Via	
Job #/SC #/Tag #	
Customer Name	

QTY.	ITEM #	DESCRIPTION	RFR	P.O. #
2	NL005461	Short Screen		
		NCS is covering Freight		

RBI Signature: _____ Supplier Signature: _____

Date: _____